

State of Missouri

**2005 STOP Violence Against Women
Grant Program**

Request for Proposal / Application Packet

Missouri Department of Public Safety
Office of the Director
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DEADLINE:

Received by the Missouri Department of Public Safety by 4:30 p.m. on Thursday, September 9, 2004 or postmarked by
September 9, 2004.

(See Filing Procedures for Complete Instructions)

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This application packet contains the guidelines for the 2005 STOP Violence Against Women Grant Program. You will need to keep this packet for future reference in the event that your agency is awarded STOP funding.

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Program Description And Guidelines

Program Description and Guidelines

INTRODUCTION

The ***STOP Violence Against Women Grant Program***, is authorized by Sections 2001 through 2006 of the Omnibus Crime Control and Safe Streets Act of 1968, as amended by Title IV, Section 40121 of the Violent Crime Control and Law Enforcement Act of 1994, Public Law 103-322, and reauthorized by the Violence Against Women Act of 2000 (signed by the President on October 28, 2000). The U.S. Department of Justice, Violence Against Women Grant Office within the Bureau of Justice Assistance administers these funds at the federal level, and the Missouri Department of Public Safety administers the ***STOP Violence Against Women Grant Program*** funds at the state level.

The Violence Against Women Act reflects a firm commitment toward working to change the criminal justice system's response to violence against women. Significant Federal resources and attention to restructuring and strengthening the criminal justice system's response to violence against women will be committed through the year 2005.

The ***STOP Violence Against Women Grant Program***, hereinafter referred to as the ***STOP Program***, encourages the development and implementation of effective law enforcement and prosecution strategies to combat violent crimes against women and the development and enhancement of victim services in cases involving violent crimes against women.

Each recipient of grant funds must abide by the statutory requirements of the ***STOP Program*** and Bureau of Justice Assistance Guidelines as outlined in this Program Description.

DEFINITIONS

Domestic Violence – the term “domestic violence” includes felony or misdemeanor crimes of violence committed by a current or former spouse of the victim, by a person with whom the victim shares a child in common, by a person who is cohabiting with or has cohabitated with the victim as a spouse, by a person similarly situated

to a spouse of the victim under the domestic or family violence laws of the jurisdiction receiving grant monies, or by any other adult person against a victim who is protected from that person's acts under the domestic or family violence laws of the jurisdiction receiving grant monies. For the purposes of this ***STOP Program***, “domestic Violence” also includes any crime of violence against an adult considered to be an act of domestic violence according to State Law.

According to Section 455.200, RSMo, domestic violence in the state of Missouri is defined as “attempting to cause or causing bodily injury to a family or household member, or placing a family or household member by threat of force in fear of imminent physical harm.” A “family or household member” is further defined as “a spouse, a former spouse, person living with another person whether or not as spouses, parent, or other adult person related by consanguinity or affinity, who is residing or has resided with the person committing the domestic violence and dependents of such persons.”

Law Enforcement – the term “law enforcement” means a public agency charged with policing functions, including any of its component bureaus (such as governmental victim services programs).

Prosecution – the term “prosecution” means any public office or agency charged with direct responsibility for prosecuting criminal offenders, including such office's or agency's component departments or bureaus such as governmental victims services programs). Prosecution support services, such as overseeing or participating in statewide or multi-jurisdictional domestic violence task forces, conducting training for state and local prosecutors, or enforcing victim compensation and domestic violence-related restraining orders shall be considered “direct responsibility” for purposes of this ***STOP Program***.

Sexual Assault – the term “sexual assault” means any conduct prescribed by chapter 109A of Title 181, United States Code, whether or not the conduct occurs in the special maritime and territorial jurisdiction of the United States or in a federal prison and includes both assaults

committed by offenders who are strangers to the victim and assaults committed by offenders who are known or related by blood or marriage to the victim.

Underserved Populations – the term “underserved populations” includes populations underserved because of geographic location (such as rural isolation), underserved racial or ethnic populations and populations underserved because of special needs, such as language barriers or physical disabilities.

Victim Services – the term “victim services” means a nonprofit, nongovernmental organization that assists domestic violence or sexual assault victims, including rape crisis centers, battered women’s shelters, and other sexual assault or domestic violence programs, including nonprofit, nongovernmental organizations assisting domestic violence or sexual assault victims through the legal process.

For purposes of this STOP Program, victim services may include support for lawyer and non-lawyer advocates, including specialized domestic violence court advocates in courts where a significant number of protective orders are granted. Legal or defense services for perpetrators of violence against women may not be supported with grant funds.

This definition also encompasses statewide domestic violence and sexual assault coalitions to the extent that they provide direct services to domestic violence and sexual assault victims.

Governmental victim services programs established as nonprofit organizations are eligible to apply under the designated victim services category. However, other governmental victim services programs are eligible for funding only under the respective law enforcement or prosecution categories or under the discretionary category.

Forensic Medical Examination – the term “forensic medical examination” means an examination provided to a sexual assault victim by medical personnel trained to gather evidence of a sexual assault in a manner suitable for use in a court of law. The examination should include at a minimum:

1. Examination of physical trauma;
2. Determination of penetration or force;
3. Patient interview; and
4. Collection and evaluation of evidence.

Hard Cash Match – funds in the form of cash available from funding sources other than state or federal funding programs.

In-Kind Contributions – non-monetary contributions and donations received from individuals, agencies, associations, organizations, etc., by the applicant agency.

Direct Services to Domestic Violence and Sexual Assault Victims – this term includes:

- **Crisis Intervention Services** – counseling to provide emotional support in crisis arising from the occurrence of crime.
- **Emergency Services** – providing, in an emergency, transportation to court, short-term childcare services, temporary housing and security measures, and assistance in participation in criminal justice proceedings.
- **Counseling** – in-person crisis intervention, emotional support, and guidance and counseling provided by advocates, professional counselors, mental health professionals, or peers. Such counseling may occur at the scene of the crime, immediately after a crime, or be provided on an on-going basis.
- **Follow-up Contact** – in-person contacts, telephone contacts, and written communications with victims to offer emotional support, provide empathetic listening, check on a victim’s progress, etc.
- **Therapy** – intensive professional treatment by licensed mental health professionals. This includes the evaluation of mental health needs as well as the actual delivery of psychotherapy.
- **Group Treatment/Support** – the coordination and provision of supportive group activities including self-help, peer, social support, etc.
- **Crisis Hotline Counseling** – the operation of a 24-hour telephone service, seven days per week, which provides counseling, guidance, emotional support, information, and referral, etc.

- **Shelter/Safehouse** – short-term and long-term housing and related support services to victims and families following victimization.
- **Information and Referral** – telephone and in-person contacts with victims during which time services and available support are identified.
- **Criminal Justice Support/Advocacy** – support, advocacy, and assistance provided to victims at any stage of the criminal justice process.
- **Emergency Financial Assistance** – cash outlays for transportation, food, clothing, emergency housing, etc.
- **Assistance in Filing Compensation Claims** – making victims aware of the availability of crime victim compensation, assisting the victim in completing the required forms, gathering the needed documentation, etc. It may also include follow-up contact with the victim compensation agency on behalf of the victims.
- **Personal Advocacy** – assisting victims in securing rights, remedies, and services from other agencies; locating emergency financial assistance; intervening with employers, creditors, and others on behalf of the victim; assisting in filing for losses covered by public and private insurance programs including workman's compensation, unemployment benefits, welfare, etc.; accompanying the victim to the hospital; etc.

MATCH REQUIREMENTS

All subgrantees must provide a minimum of **25 percent of the total project cost as match**. Cash or in-kind contributions may be used as match. The matching funds cannot be other state or federal funds. Subgrantees are responsible for ensuring that match is identified in a manner that guarantees its accountability during an audit.

In-kind match may include donation of expendable equipment, office supplies, workshop or classroom materials, work space, or the monetary value of time contributed by professional and technical personnel and other skilled and unskilled labor if the services they provide are an integral and necessary part of a funded project. The value placed on loaned or donated equipment may not exceed its fair market value. The value placed on donated services (volunteer match) must

be computed at \$9.50 per hour. Fringe benefits may be included in the valuation. Volunteer services must be documented through timesheets and to the extent feasible, supported by the same methods used by the recipient organization for its own employees. The value of donated space as established by an independent appraisal of comparable space and facilities in a privately owned building in the same locality. The basis for determining the value of personal services, materials, equipment, and space must be documented.

The purpose of matching funds is to augment the amount of resources available to the project from grant funds. The costs of activities counted as match must be directly related to the project goals and objectives and should be included as part of any evaluation or assessment. For example, if STOP funds are used to hire a second victim advocate in a prosecutor's office to expand the availability of services to battered and sexually assaulted women, the time and activities of the original victim advocate may be considered as local match. Both advocates' time devoted to grant-related activities must be documented in an auditable manner. If half of a prosecutor's time is supported with grant funds, that prosecutor must track ALL of her or his time to demonstrate that 50% of it was devoted to the grant-funded project. All local match must be documented in the same manner as grant-funded activities.

All funds designated as match are restricted to the same uses as the **STOP Program** funds and must be expended within the grant period.

ALLOCATION OF FUNDS

The **STOP Program** Funds are to be distributed to public and nonprofit agencies to carry out programs and projects specified under the eligible purposes identified herein. In distributing funds, states must:

- 1) Give priority to areas of varying geographic size with the greatest showing of need. In assessing need, states must consider the range and availability of existing domestic violence and sexual assault programs in the population and geographic area to be served in relation to the availability of such programs in other such populations and geographic areas;

- 2) Take into consideration the population of the geographic areas to be served by a subgrantee;
- 3) Equitably distribute monies on a geographic basis, including non-urban and rural areas of various geographic sizes.
- 4) Ensure that the needs of previously underserved populations are identified and addressed; and
- 5) Allocate at least 25 percent of the total grant funds available to law enforcement, 25 percent to prosecution agencies, 30 percent to victim service agencies, and 5 percent to the courts.

NON-SUPPLANTATION

Grant funds must be used to increase the total amount of such other funds used to combat violence against women. The **STOP Program** funds must be used to fund new projects, or expand/enhance existing projects. A grant recipient may not use federal grant funds to pay for programs that the recipient already is obligated to pay or has funded. For example, if a grantee, prior to submitting an application, had committed to develop and implement a program to combat violence against women, the grantee must make that program available, in addition to **STOP Program**-supported services. State, local or other funds currently allocated to combat violence against women may not be reallocated to other purposes should a **STOP Program** grant be made. Non-federal funds must remain available for and dedicated to these purposes, with **STOP Program** funds serving as a supplement to those non-federal funds.

The non-supplantation requirement applies only to state and local public agencies. It does not apply to nonprofit, nongovernmental victim services programs.

ELIGIBLE APPLICANTS

Public and nonprofit private agencies are eligible to apply for funds available through the **STOP Violence Against Women Grant Program**.

COORDINATION & INTEGRATION

In developing a program, applicants should develop a plan for implementation and consult and coordinate with nonprofit, nongovernmental victim services programs

(including sexual assault and domestic violence victim services programs) and local units of government (including police, prosecutors, sheriff's etc.). The goal of the planning process is the enhanced coordination and integration of law enforcement, prosecution, courts, probation and parole agencies and victim services in the prevention and identification of and response to cases involving violence against women.

The overall goal of the **STOP Violence Against Women Grant Program** is to encourage states and localities to restructure and strengthen the criminal justice system's response to this problem; to draw on the experience of all the players in the system, including the advocate community; and to develop a comprehensive set of strategies to deal with these complex problems. The development of such strategies necessitates collaboration among law enforcement, prosecutors, the courts, and victim services providers. This coordination and integration will lead to the development of a comprehensive, systemic community approach to addressing violent crimes committed against women.

ELIGIBLE PURPOSES

The **STOP Violence Against Women Grant Program** funds may be used for the following purposes:

Training law enforcement officers, judges, other court personnel and prosecutors to more effectively identify and respond to violent crimes against women, including crimes of sexual assault and domestic violence;
Developing, training, or expanding units of law enforcement officers, judges, other court personnel and prosecutors specifically targeting violent crimes against women, including the crimes of sexual assault and domestic violence;

Developing and implementing more effective police, court and prosecution policies, protocols, orders, and services specifically devoted to preventing, identifying, and responding to violent crimes against women, including the crimes of sexual assault and domestic violence;

Developing, installing, or expanding data collection and communication systems, including computerized systems linking police, prosecutors, and courts or for the purpose of identifying and tracking arrests, protection

orders, violations of protection orders, prosecutions, and convictions for violent crimes against women, including the crimes of sexual assault and domestic violence;

Developing, enlarging, or strengthening victim services programs, including sexual assault, domestic violence, and dating violence programs; developing or improving the delivery of victim services to underserved populations; providing specialized domestic violence court advocates in courts where a significant number of protection orders are granted; and increasing reporting and reducing attrition rates for cases involving violent crimes against women, including sexual assault and domestic violence;

Developing, expanding, or strengthening programs addressing stalking;

Supporting formal and informal statewide, multidisciplinary effort, to the extent not supported by state funds, to coordinate the response of state law enforcement agencies, prosecutors, courts, victim services agencies, and other state agencies and departments, to violent crimes against women, including the crimes of sexual assault and domestic violence;

Training of sexual assault forensic medical personnel examiners in the collection and preservation of evidence, analysis, prevention, and providing expert testimony and treatment of trauma related to sexual assault;

Developing, enlarging, or strengthening programs to assist law enforcement, prosecutors, courts, and others to address the needs and circumstances of older and disabled women who are victims of domestic violence or sexual assault and targeting outreach and support, counseling, and other victim services to such older and disabled individuals.

In general, **STOP Program** funds may support personnel, training, technical assistance, evaluation, data collection, and equipment costs to:

- 1) Enhance the apprehension, prosecution, and adjudication of persons committing violent crimes against women, and
- 2) Enhance services that meet the needs of women victimized by violence.

Funding for civil justice assistance is allowable but is limited to situations that bear directly and substantially upon criminal justice matters or are inextricably intertwined with criminal justice matters. Legal assistance to victims attempting to obtain civil protection orders may be supported with STOP funds because it is consistent with the overall intent of the statute.

Children's services supported with STOP funds must show an inextricable link and be the direct result of providing services for a woman. For example, STOP funds may support the expansion of battered women's shelter services to include programs for children of the battered women residing in the shelter.

Batterer's treatment may be supported if such treatment is part of a graduated range of sanctions that use the coercive power of the criminal justice system to hold abusers accountable for their criminal action and for changing their behavior. (Batterer's treatment programs may be funded through the "discretionary" portion of the **STOP Program** funds.)

INELIGIBLE ACTIVITIES

Ineligible activities include, but are not necessarily limited to, the following:

- Ø **Lobbying** and administrative advocacy for legislative or administrative reform, whether conducted directly or indirectly.
- Ø **Perpetrator Rehabilitation** and counseling. Sub recipients cannot knowingly use **STOP Program** funds to offer rehabilitative services to offenders. However, batterers' treatment may be supported if such treatment is part of a graduated range of sanctions that use the coercive power of the criminal justice system to hold abusers accountable for their actions and for changing their behavior.
- Ø **Fundraising Activities.**
- Ø **Children's Programs** that focus exclusively on support services for children.
- Ø **Prevention Programs** for schools.
- Ø **Divorces and Legal Separations** are civil proceedings that fall outside the scope of the seven broad purposes for which STOP funds may be used. STOP funds may not be used to support services for obtaining divorces or legal separations.

INELIGIBLE COST ITEMS

Ineligible cost items include, but are not necessarily limited to, the following:

- Ø **Construction** or renovation costs.
- Ø **Acquisition** cost of real estate property.
- Ø **Vehicles** - either leased or purchased.
- Ø **Salaries** – fees and reimbursable expenses associated with administrators, board members, executive directors, consultants, coordinators, and other individuals unless, and to the extent that, these expenses are incurred while providing services necessary to the success of the STOP Program funded project.
- Ø **Salaries** or expenses of any applicant, or agent acting for the applicant, to engage in any activity designed to ***influence legislation*** or appropriations pending before the Missouri General Assembly or United States Congress.
- Ø **Professional Dues** and memberships.
- Ø **Indirect Agency Costs**

CONTRACT PERIOD

The contract period for the 2005 STOP projects is January 1, 2005 through December 31, 2005.

MONITORING

All contracts will be subject to monitoring by the Missouri Department of Public Safety, Office of the Director, to insure appropriated fiscal and program records are being maintained. The contractor may be required to submit such monitoring information in writing to the Department of Public Safety, Office of the Director. The Department of Public Safety may monitor each contract annually.

PERFORMANCE REPORT

Recipients of the **STOP Program** funds will be required to submit performance reports (**APPENDICES D – M**) at the end of the contract period to the Department of Public Safety for the preceding year. The performance report will be due by January 15, 2005. Failure to submit the Performance Report by that date could result in new contract funds being withheld until the report is received. The performance report shall include information

obtained based on the evaluation tool described by the applicant agency in the narrative work program for the contract and must also include the following information:

- **Victim Statistics** – The nature of the geographic location, race, ethnicity, language and disability;
- **Criminal justice statistics** – The total number of victims served by each program and the criminal justice status, if known, of each case. (Was the crime reported or not reported? Was the case prosecuted or not prosecuted? What was the outcome if prosecuted?);
- **Staff Information** – The total number of hours contributed to the program by project staff including professionals, volunteers, and interns. The total number of hours of training received by project staff during that period;
- **Benefits** – Any changes that have occurred to improve the criminal justice system's response to violence against women victimized by violence that can be attributed to receiving the STOP Program federal funds. (These are changes that the contractor feels would not have been possible without these federal funds.);
- **Community Coordination** – A brief description of how the contractor has worked with other service providers, community leaders, criminal justice agencies, etc. to create a collaborative, systemic approach to addressing violence committed against women within the community.

CONTACTS

Any questions regarding the ***STOP Violence Against Women Grant Program*** may be directed to the Department of Public Safety, Office of the Director at (573) 751-4905.

Grant Application Instructions

Grant Application Instructions

All portions of the STOP Grant Application shall be completed and submitted for funding consideration. The STOP Grant Application forms and narrative must be typewritten. The Application Packet consists of the following:

- Grant Application Instructions
- Application Summary Report
- Application for Funding and Budget Pages
- Personnel Information
- Certified Assurances
- Audit Requirements
- Report of Expenditures and Check Payee Information
- Other Funding Sources
- Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion – Lower Tier Covered Transactions
- Certification of 501(c)(3) Status
- Missouri Department of Public Safety Financial and Administrative Guidelines for Contracts

INSTRUCTIONS

APPLICATION FOR FUNDING FORM:

Complete the *APPLICATION FOR FUNDING* form using the instruction page included in the *Application Forms* section of this application.

APPLICATION SUMMARY REPORT FORM:

Provide the requested information on this form. Provide a brief summary of the proposed project; do not refer us to the narrative section of the application. This information is used to provide a brief summary of the funded projects to the legislators and other interested parties at their request.

BUDGET PAGE FORMS:

Included in this application packet are budget forms for *PERSONNEL*, *VOLUNTEER MATCH*, *TRAVEL*, *EQUIPMENT*, *SUPPLIES/OPERATIONS*, and *CONTRACTUAL* categories. Submit only the appropriate budget forms for which you are seeking funding.

Provide a complete breakdown of the budget for implementation and operation of the proposed project on the appropriate budget forms. Instructions for completing the budget forms are printed at the top of each form. Please be sure to follow these instructions precisely.

Refer to the **Program Description** and **Financial and Administrative Guidelines for Contracts** for information on the use of funds. The total project cost of each budget form must be transferred to the *Application for Funding* form. The total of the Federal and Local Match share amounts on the budget forms must equal the 75% Federal match and the 25% Local match share amounts on the *Application for Funding* form.

Submit the completed budget forms with the application. If you **not** requesting funding on a particular budget form, you do not need to include that form with the application. Show "\$0" for that budget category on the *Application for Funding* form.

Please keep in mind the following as you are completing the budget pages:

Personnel Budget Form - the actual monthly salary of individuals must be shown in the "Salary per Month" column on the Personnel budget page. For instance, Advocate A receives a monthly salary of \$2,000.00 for a total yearly salary of \$24,000. STOP covers \$12,000 of Advocate A's salary and your agency funds cover the remaining \$12,000. On the personnel budget page under the "Salary per Month" column you would enter \$2,000. The percentage of time on the grant is 50% (since STOP is paying

half of Advocate A's salary) and the months to be employed would be 12. The total cost for Advocate A is \$12,000 (\$2,400 * 50% * 12). The percentage of time on the grant refers to the amount of an individual's time funded by STOP.

The percentage of time for a part-time employee who spends all of his/her time on grant activities and whose entire salary would be funded by STOP should be shown as 100%.

Fringe benefits must be itemized on the Personnel budget page. Medical, dental and vision insurance premiums should be shown as separate line items unless they are all included in the same premium and are not itemized. Personnel funded through City and County Governments are employees of the City or County and should receive the same benefits/pay as other similar employees in the City/County Government.

Travel Budget Form – Mileage for the 2005 STOP contract should be figured at no more than \$0.345 per mile. This amount is the approved mileage rate for the State of Missouri. If your agency reimburses less than this amount, you will need to use your agency's reimbursement amount. If your agency reimburses more than this amount, you will need to use the State of Missouri's reimbursement rate.

Travel expenses for conferences and training should be itemized on the travel budget page. Registration costs are not considered travel expenses and should be listed on the Supplies/Operations budget page. Please estimate to the best of your ability the costs for travel. Reimbursement for meals can be shown as a per diem rate, but only actual expenses will be reimbursed. Receipts must be available for reconciliation if funds are awarded and reimbursed.

Supplies/Operations Budget Form – there is a list of Office Supplies in the Eligible Cost Items section of this application. An "office supplies" line item can be included on the Supplies/Operations Budget Page in reference to this approved list. You do not need to list any of the items contained in that list. If you are requesting funding for an item that is not contained within that list, you will need to show that item(s) separately on the Supplies/Operations budget page. Only office supplies for the STOP project can be requested.

Contractual Budget Form – If contractual budget items are necessary for the STOP project, you must have a written contract for those services. A draft contract should be submitted with the application outlining what services will be performed, who will perform the requested contractual services, when they will be performed, and the rate at which they will be performed.

Refer to the **Program Description** and **Financial and Administrative Guidelines for Contracts** for information on the use of funds. The total project cost of each budget form must be transferred to the *APPLICATION FOR FUNDING* form.

Submit the completed budget forms with the application. If you are not requesting funding on a particular budget form, you do not need to include that form with the application. Show "\$0" for that budget category on the *APPLICATION FOR FUNDING* Form.

Personnel Information Form – Submit this form when submitting the PERSONNEL budget form. Only individuals funded through this grant program should be listed on this form. The job responsibility should explain what this person would be doing on the grant program. If personnel are not funded 100% on the grant, detailed time accounting must be kept to track 100% of the employee's time. A suggested format for time accounting can be found as an appendix to the application packet. If you are requesting a new position in the grant, submit the PERSONNEL INFORMATION form with whatever information can be provided at the time. If a contract is awarded, submit the updated form to our office once the individual is hired so that it can be placed in the original file.

NARRATIVE WORK PROGRAM:

Provide a complete *Narrative Work Program* for the proposed project to explain, in detail, the need for the funding, the intended use of the funding, and the anticipated results of the program. The narrative work program should focus on the project to be funded, **not** the entire agency.

On plain white paper, identify each of the specific sections of the Narrative Work Program outline. **Please be sure to follow this outline and to include all of the information requested.** Do NOT use pitch smaller than 12. Please space between the paragraphs to ensure ease in reading. Please number the pages of the Narrative Work Program. The Narrative Work Program should not be more than 12-14 pages overall (not including appendices).

- A. **Brief History of the Program Project Agency** – Provide a brief history of your agency including a description of any existing programs, policies, and/or procedures addressing violent crimes committed against women. Also include any future plans for your program(s). Limit to one page
- B. **Statement of the Problem** – This section must address the need for grant funds and the proposed project. Define the problem that you will be attempting to impact with the project for which you are requesting funds. Be specific. Do not include every issue the Project Agency addresses, but only the one(s) that will be impacted by the use of the STOP funds being requested. Since you are competing with other agencies for limited funds, you should document as extensively and as factually as possible the definition of the problem. This section must justify the proposed services to be outlined in Part C, Methodology. For example, include facts and statistics on incidents of crime, the number of victims served during the past year – (two years, three years, etc.), existing resources, demographic and geographic specifications, etc. Limit to two pages
- C. **Goals and Objectives** – Explain your expectations (goals and objectives) for the proposed program. **Goals** are the program's desired results or what you want to accomplish. The goals should be clearly stated, realistic and achievable, even if they are not readily measurable. **Objectives** are the intermediate results or accomplishments to be achieved by the program pursuing its goals.

The objectives need to be measurable, process-oriented (services to be provided), client-oriented (services for clients) and outcome-oriented (why provide the services-benefits to crime victims). They should express the extent to which you expect to alleviate the problem defined in the Statement of Problem. Examples of outcomes include: 85% of the clients will establish independent living free from abuse. 90% of the clients served through this STOP funded project will indicate that they are satisfied with the services provided. Through pre- and post-testing, 80% of the clients will show a better understanding of the dynamics of victimization. These are just a few EXAMPLES. They do not apply to every program and there are many others that could be included. **Be specific to this project; do not include overall agency goals or objectives.** Limit to two pages

- D. **Evaluation Procedure** – Describe the process to be used to determine the effectiveness of your program, such as pre and post testing, surveys, client-satisfaction evaluations, arrest rates, rates of recidivism, prosecution rates, etc. Also include a description of the data to be collected, as outlined in the Program Description, to prepare any progress reports and/or final reports required by the *STOP Violence Against Women Program*. Limit to one page or less.
- E. **Methodology** – This section must address the intended use of the grant and local match funds. Following the outline shown below, give specific details concerning the organization, administration, and implementation of the project. Again, be specific to the project, not to the overall operation of the Project Agency. The following items must be addressed in this section:
 - 1. **Type of Program** – Specifically outline the services to be provided by this project. Give as much detail as possible about your proposed project. Define what services will be provided, who will provide these services, how they will be provided and who will benefit from the services your program will provide. Flow charts and chronological outlines are great, but must be supported by additional narrative description. At least one page

2. **Proposed Service Area** – State the geographic area to be served by this project.
3. **Coordination & Integration** – the STOP Program requires applicants to: develop a plan for implementation, and to consult and coordinate with nonprofit, nongovernmental victim services programs (including sexual assault and domestic violence victim services programs) and local units of government (law enforcement, prosecutors, sheriffs, etc.) Outline how your agency will coordinate the activities of this project with other services provided in your community. Explain how the services to be offered by this project will compliment other activities and services already in place in your community. Please attach letters of support or specific agreements developed between law enforcement, prosecutors, service providers, and other community agencies to document the development of a community approach to violent crimes against women. Also state how often your agency and the criminal justice and/or other agencies will meet to discuss the community's plan to address violent crimes committed against women.
4. **Identification of Matching Funds** – Specifically identify the source(s) of the matching funds and the specific budget line items to be covered by the local matching funds. The local match share requirement is 25% of the total project cost (not 25% of the Federal Funds requested) of your application. One way to determine the local match required on the federal dollar amount you are requesting is to divide the federal funds amount by 75% then subtract that amount from the Federal Funds amount. The amount remaining is the local match required (i.e. \$12,000 federal funds requested, $\$12,000 / 75\% = \$16,000$ $\$16,000 - \$12,000 = \$4,000$ -the amount of match needed). Identify who will be providing these funds, how much they will be providing and describe the source of the funds. The value placed on loaned and donated equipment may not exceed its fair market value. The value of donated space may not exceed the fair rental value of comparable space as established by an independent appraisal of comparable space and facilities in privately owned buildings in the same locality. Agencies cannot "donate" space to themselves, i.e. if the applicant is a county and the office space used by the project agency is owned by the county the fair market value of that space cannot be used as match. **No more than one page.**
5. **Budget Justification** – Justify the need for all items listed in the budget for which STOP or local match funds will be used. Justify each individual budget line item. Do not just list the items requested for funding – explanation of each budget item must be included for consideration of funding. For personnel, you must also indicate if the position is an existing or new position. If the position currently exists, indicate how the position has been funded in the past. If a salary increase is included, provide the % of increase and the date of the increase will occur. If you are requesting funding for personnel or items that are currently funded by the agency but not funded through STOP, please explain why STOP should pick up these costs. **Project cost that is currently paid by the Applicant Agency may be subject to the rules of supplanting and unallowable.** No more than two pages.
6. **Supplanting** – Address the issue of supplanting as it pertains to this grant. Supplanting applies to State and local units of Government who are applying for STOP funds. If you are requesting funds for existing costs not covered through STOP, please address in detail how using STOP funds for these costs would not constitute supplanting. Supplanting does not apply to nonprofit organizations through STOP. No more than one page.
- F. **Cost Assumption** – Describe how the Project Agency plans to continue the activities of this project if *STOP funds* would no longer be available to the Project Agency. What proactive steps are being taken to absorb the project cost into the applicant's future budget? Provide information on the development of a contingency plan for victim services if your agency has developed such a plan. Limit to one page or less.
- G. **Report of Success** – For existing STOP grant recipients-In outline format, list the goals and objectives from your current contract. Provide information regarding whether or not each goal and its objective(s) have been attained to date. Include all information obtained pursuant to the "Evaluation" section of the narrative for your current contract. Attach any reports, surveys, or other measurement tools that support the success of your project. Be sure to include any information required by the Performance Report as outlined in the Program Description. **NOTE:** This component is applicable only to those proposals seeking continuation of a project already supported with *STOP Program* funds. (Agencies who have never received STOP program funds will not be required to include a report of success.)

Additional Forms – Provide the information requested on the following forms:

- Audit Requirements Form-Please complete the Federal and State funds received section of the form even if you have not or are not required to have an audit completed.
- Report of Expenditures and Check Payee Information
- Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion – Lower Tier Covered Transactions Form
- Other Sources of Funding-Please list any other funds used for the STOP project (Local, State or Federal)
- Certification of 501(c)(3) and a copy of 501©(3) IRS application\approval letter (not-for-profit agencies only)

Additional Information – Attach copies of the following information:

- Your agency's organizational chart
- Your agency's procurement (purchasing) policy
- Job descriptions for personnel involved in this proposed project. These should include the job duties for the position and the minimum requirements for the position.
- Your agency's current budget breakdown (for your agency as a whole). Please provide your actual expenditure and income breakdown; you may also include your "balanced" budget.
- A list of your organization's Board of Directors (if agency is a nonprofit organization)
- Letter from the IRS regarding 501(c)(3) status (if agency is a nonprofit)
- A minimum of five current (date on letter) letters from agencies in your community that support this specific project. Letters of support should indicate to the reader that the individual is familiar with the program you are requesting STOP grant funds for. Letters should not be about your agency in general.

NOTE: Letters from your agency's authorized official, project director, commissioners, administrators or board members do not count towards the required five letters of support. Multiple letters from victims will only count as one of the required five letters of support. A memorandum of Agreement (MOA) cannot be submitted in lieu of the required five letters of support; it will count as one of the required five letters of support.

Assembling the Application – Please assemble the completed application in the following order for submission:

- | | |
|--|--|
| 1. Application Summary Report | 10. Certified Assurances |
| 2. Application for Funding with Budget Pages | 11. Audit Requirements |
| 3. Personnel Information | 12. Report of Expenditures and Check Payee Info |
| 4. Job Descriptions | 13. Certification Regarding Debarment |
| 5. Narrative Work Program | 14. Certification of 501(c)(3) |
| 6. Your Agency's Current Budget | 15. Copy of Letter from IRS regarding 501(c)(3) approval |
| 7. Other Funding Sources | 16. List of Board of Directors |
| 8. Your Agency's Organizational Chart | 17. 5 Current Letters of Support |
| 9. Agency Procurement Policy | |

Copies of Application – The properly signed/assembled original *Application* and three copies (four total) must be submitted to, and received by, the Office of the Director, Department of Public Safety by **4:30 p.m. on September 9, 2004 or postmarked no later than September 9, 2004.**

NOTE: Applications sent using office-based postage meters will not be accepted if received in the DPS office after September 9, 2004 regardless of the postmark date, as these postage meters are not acceptable proof of timely mailing. It is strongly recommended that the applicants use the United States Postal Service or a traceable shipping service that guarantees a delivery date to ensure that applications arrive promptly.

Applications received via facsimile or e-mail will not be accepted at any time. Applications for the STOP grant that do not meet the above submission requirements **will not** be considered for funding.

Please mark the ORIGINAL *Application for Funding* in the upper right hand corner of the face sheet. **PLEASE DO NOT BIND THE APPLICATION PACKETS – STAPLE IN THE UPPER LEFT HAND CORNER.**

Applications will not be reviewed if they are received after 4:30 p.m. on September 9, 2004 or postmarked later than September 9, 2004.

Evaluation Criteria – The Department of Public Safety will consider the following factors when evaluating the merit of each application:

- ❖ Demonstration of need including geographic location, other programs available, local demographics, local statistics, etc.
- ❖ Adequate correlation between the cost of the project and the objective(s) to be achieved
- ❖ Probability of project to meet identified goal(s)
- ❖ Overall description of the intended use of the grant and local match funds
- ❖ Demonstration that STOP funds will not be used to supplant state and local funds if applicable
- ❖ Degree of cooperation between local officials, community groups, and citizens to fulfill goals for the overall success of the project
- ❖ Demonstration that applicant agency has met the local match requirements and has identified the source(s) of the local match
- ❖ Demonstration that the applicant agency has met and will continue to comply with all applicable state and federal laws and guidelines
- ❖ Ongoing success of the program
- ❖ Ratio of funding requested to services being provided is relative
- ❖ Overall quality of the application

Award of Contract – If the application is approved, the Award of Contract will serve as a contractual agreement between the Department of Public Safety and the Applicant Agency.

Department of Public Safety Contacts – Any questions regarding the application for funding or the administration of your contract may be directed to the Department of Public Safety staff person indicated below at (573) 751-4905.

Audit Information:	Deborah Borchers-Ausmus ALL FEDERAL AND STATE GRANT PROGRAMS Responsible for any audit issues
Financial Information:	Carol Willhite Responsible for issues concerning Expenditure Reports, Requests for Funds and Monthly Detail Reports
Program Information:	Victim Services Program Staff STOP Violence Against Women Grant Program (VAWA) Responsible for issues concerning the Application Process, Status of Awards, Budget Revisions, Program Changes, Monitoring Issues, Performance Reports, etc.

Four Sets of the Application (original plus three copies) must be submitted to:

Missouri Department of Public Safety
Director's Office
PO Box 749
Jefferson City, MO 65102-0749

The street address for the Department of Public Safety is:

301 W. High Street
Truman Building, Suite 870
Jefferson City, MO 65101

Applications must be received by no later than 4:30 p.m. on Thursday, September 9, 2004, or postmarked by September 9, 2004 to be considered for funding.

NOTE: Applications sent using office-based postage meters **WILL NOT** be accepted if received in our office after September 9, 2004 regardless of the postmarked date, as these postage meters **ARE NOT** acceptable proof of timely mailing. It is strongly recommended that applicants use the United States Postal Service or a traceable shipping service that guarantees a delivery date to ensure that applications arrive promptly.

Applications received via facsimile or e-mail **will not** be accepted at any time. Applications for the STOP Grant that do not meet the above submission requirements **will not** be considered for funding.

Application Forms

STOP APPLICATION SUMMARY REPORT

Agency Name		Program Title	
Authorized Official Name and Address (include ZIP Code)		Project Director Name and Address (include ZIP Code)	
Phone Number (include Area Code): Fax Number (include Area Code):		Phone Number (include Area Code): Fax Number (include Area Code):	
STOP Program Funds Requested \$ _____	Local Match Share Required \$ _____	Source(s) of Local Match _____ _____	
Geographic Area to be served by this project: _____			
<p>The requested STOP Program funds will be used for: (Prorate percentage of time if project covers more than one category.)</p> <p> <input type="checkbox"/> Law Enforcement <input type="checkbox"/> Prosecution <input type="checkbox"/> Victim Services Project <input type="checkbox"/> Other/Combination (specify) _____ </p> <p> <input type="checkbox"/> % Courts <input type="checkbox"/> % Law Enforcement <input type="checkbox"/> % Prosecution <input type="checkbox"/> % Victim Services <input type="checkbox"/> % Other (specify) _____ </p> <p>The requested STOP Program funds will be used to:</p> <p> <input type="checkbox"/> Fund a New Project <input type="checkbox"/> Expand/Enhance an Existing Project <input type="checkbox"/> Continue an Existing Project </p>			
<p>The Focus of this project is on: (Check all that apply.)</p> <p> <input type="checkbox"/> Domestic Violence <input type="checkbox"/> Sexual Assault <input type="checkbox"/> Stalking <input type="checkbox"/> Other (Please explain) _____ </p>			
<p>Indicate the anticipated number of victims to be served by this STOP funded project: <input type="text"/> Total Victims of Crime <input type="text"/> Hotline Calls</p> <p>If a domestic violence shelter, indicate the anticipated number of women and children to be served, by this STOP funded project, in shelter and outreach services, the number of anticipated hotline calls and the anticipated number of bednights.</p> <p> <input type="text"/> Women <input type="text"/> Children <input type="text"/> Hotline Calls <input type="text"/> Bednights </p> <p>If a training/technical assistance project, show the anticipated number of people and/or communities to be trained:</p> <p> <input type="text"/> People <input type="text"/> Communities </p>			
<p>Give a brief summary of the services to be offered by this STOP Program project:</p>			



SECTION 1 – INSTRUCTIONS

This application must be typewritten. Please refer to the enclosed instructions to complete this form.

SECTION 2 – GRANT PROGRAMS

- | | | |
|--|---|---|
| <input type="checkbox"/> VOCA – Victims of Crime Act | <input type="checkbox"/> SSVF - State Services to Victims Fund | <input type="checkbox"/> STOP - Stop Violence Against Women Grant Program |
| <input type="checkbox"/> Byrne – Byrne Formula Grant (NCAP) | <input type="checkbox"/> MCLUP – Mo. Crime Lab Upgrade Program | <input type="checkbox"/> RSAT – Residential Substance Abuse & Treatment Program |
| <input type="checkbox"/> CLAP – Crime Lab Assistance Program | <input type="checkbox"/> LLEBG - Local Law Enforcement Block Grant | <input type="checkbox"/> LGSD – Local Government School District Program |
| <input type="checkbox"/> Title V – Delinquency & Youth Violence Prevention | <input type="checkbox"/> Title II – Juvenile Justice Formula Grants | <input type="checkbox"/> JAIBG – Juvenile Accountability Incentive Block Grant |
| <input type="checkbox"/> Challenge – Statewide Policies and Programs | | |

SECTION 3 – APPLICANT AGENCY

AGENCY	FAX
	PHONE

ADDRESS

CITY	STATE	ZIP
------	-------	-----

SECTION 4 – APPLICANT AUTHORIZED OFFICIAL

NAME	FAX
	PHONE

TITLE

AGENCY

ADDRESS

CITY	STATE	ZIP
------	-------	-----

SECTION 5 – PROJECT DIRECTOR

NAME	FAX
	PHONE

TITLE	E-Mail Address:
-------	-----------------

AGENCY

ADDRESS

CITY	STATE	ZIP
------	-------	-----

SECTION 6 – APPLICANT FISCAL OFFICER

NAME	FAX
	PHONE

TITLE

AGENCY

ADDRESS

CITY	STATE	ZIP
------	-------	-----

SECTION 7 – NON-PROFIT BOARD CHAIRPERSON

NAME	FAX
	PHONE

TITLE

AGENCY

ADDRESS

CITY	STATE	ZIP
------	-------	-----

SECTION 8 – PROJECT TITLE

SECTION 9 – TYPE OF APPLICATION

☐ New ☐ Revised ☐ Renewal ☐ Continuation

SECTION 10 – CURRENT CONTRACT NUMBER(S)

SECTION 11 – APPLICANT'S FEDERAL TAX I.D.

SECTION 12 – PROGRAM CATEGORY

SECTION 13 – CONTRACT PERIOD

BEGINNING DATE	ENDING DATE
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SECTION 14 – TYPE OF PROJECT

☐ Statewide ☐ Regional ☐ Local

SECTION 15 – PROGRAM INCOME

Will Program Income be generated? ☐ Yes ☐ No

SECTION 16 – BUDGET

Total Cost

PERSONNEL

VOLUNTEER MATCH

TRAVEL

EQUIPMENT

SUPPLIES/OPERATIONS

CONTRACTUAL

RENOVATION/CONSTRUCTION

TOTAL PROJECT COSTS

FEDERAL/STATE SHARE

%

LOCAL MATCH SHARE

%

SECTION 17 – AUTHORIZED OFFICIAL'S SIGNATURE

Signature

Date

Instructions for Application for Funding

Section 1 – Instructions

This application must be typewritten.

Section 2 – Grant Programs

Select the appropriate grant program for which you are making application.

Section 3 – Applicant Agency

Enter the legal name and address of the organization that has the authority to legally bind the agency in a contract.

For an agency within a city government system (i.e. Police Department), the **city** is the applicant organization. For an agency within a county government system (i.e. Sheriff's Department, Prosecuting Attorney's Office), the **county** is the applicant organization. For an agency within a judicial circuit (i.e. Circuit Court, Juvenile Office), the **county** that provides fiscal management is the applicant organization.

Byrne and LLEBG– Only state and local units of government are eligible to apply for this funding.

LGSD – Only local units of government which have entered into a local government/school district partnership as defined in Section 589.300 to 589.310, Supp. 1995 are eligible to apply for this funding.

Title V - Only local units of government are eligible to apply for this funding.

Section 4 – Applicant Authorized Official - This person cannot be the same person named as the Project Director.

Enter the name and address of the individual who has the authority to legally bind the applicant agency, as listed in Section 3, in a contract.

City Government – If the applicant agency is a city, the mayor/city administrator shall be the Authorized Official.

County Government – If the applicant agency is a county, the county commissioner/administrator shall be the Authorized Official.

Private/Nonprofit – If the applicant agency is a private, nonprofit organization, the Authorized Official must be the individual who has the legal authority to bind the organization in a contract. Any potential funds awarded as a result of this application cannot be used for the salary of the Authorized Official. Generally, the executive director of the organization or the board chairperson for the organization may act as the Authorized Official.

Section 5 – Project Director

Enter the name and address of the person who will have direct oversight of the proposed project.

If the project agency is a local law enforcement agency, the Project Director shall be the chief or sheriff of that agency. Exceptions to this requirement are the St. Louis Metropolitan Police Department and the Kansas City Police Department.

Section 6 – Applicant Fiscal Officer

Enter the name and address of the individual who has responsibility for project accounting, reporting, and closeout.

Section 7 – Non-Profit Board Chairperson

Enter the name and address of the individual serving as the organization's board chairperson. Please provide an address other than the agency address if possible.

**This section is not applicable to agencies that are not considered a 501 (c) (3) non-profit organization.*

Section 8 – Project Title

Enter a carefully chosen, brief descriptive title.

Section 9 – Type of Application

Indicate the type of application based on the following:

NEW - If this application is being submitted as part of a competitive bid process, the type of application is considered **"New"**.

REVISED - If the agency has specifically been asked by the Department of Public Safety to revise a portion of a New or Renewal application, the type of application is considered **"Revised"**.

RENEWAL - If the agency has specifically been notified of the opportunity to renew an existing contract, the type of application is considered **"Renewal"**.

CONTINUATION – If this application is being submitted as part of a competitive bid process to continue a program currently funded by the Department of Public Safety, the type of application is considered **"Continuation"**.

Section 10 – Current Contract Number(s)

Indicate the DPS Contract Number if the applicant agency currently has a contract through the identified grant program.

Section 11 – Applicant's Federal Tax I.D. Number

Enter the applicant organization's Federal Tax Identification Number. This number must be included in order to document receipt of this application.

Section 12 – Program Category

Enter the appropriate categorical description for this proposed project. Refer to the Program Description section of the application for a listing of the appropriate categories.

This section is not required for VOCA, SSVF, STOP, Title V or Challenge grants.

Section 13 – Contract Period

Enter the appropriate contract period for this proposed project. Please see the following listing.

VOCA – October 1 through September 30
SSVF – July 1 through June 30
STOP – January 1 through December 31
Title V – October 1 through September 30
Title II – October 1 through September 30
JAIBG – October 1 through September 30
Challenge – See Program Description
Byrne – July 1 through June 30
MCLUP – July 1 through June 30
RSAT – July 1 through June 30
CLAP – July 1 through June 30
LLEBG – May 1 through October 31
LGSD – July 1 through June 30

Section 14 – Type of Project

Check the appropriate box.

Section 15 – Program Income

If program income will be generated by this proposed project, please indicate in this section. Refer to the program application for information on program income.

Section 16 – Budget

Refer to the program application for the appropriate funding categories for the proposed project. Enter the total cost amounts from each individual budget page in the appropriately identified space. Enter the total Project Cost based on the totals taken from the individual budget pages. Enter the federal/state share and the local match shares. Make sure that the total federal/state share from the individual budget pages agrees with the amount entered on this sheet. Also make sure that the total local match share calculated from the individual budget pages agrees with the amount entered in this section. Refer to the program application for the description of the local match share if required.

Section 17 – Authorized Official's Signature

This application must bear the ORIGINAL SIGNATURE of the Authorized Official as identified in Section 4.

PERSONNEL		PROJECT TITLE:					
		APPLICANT AGENCY:					
INSTRUCTIONS							
1. Include all personnel to be employed on the proposed project. 2. Under Title or Position , list each proposed position. 3. Under Name of the Individual , list the name of the person who will fill each proposed position (if known). 4. Show Gross Monthly Salary for each individual and show the Percent Of Time to be devoted to this grant-funded project. 5. The Total Costs should be calculated as follows: $(\text{Salary/Month}) \times (\% \text{ of Time on Grant}) \times (\text{Months to be employed})$.				6. Under the Fringe Benefits section, identify the particular benefits such as social security, workers' compensation, medical insurance, etc. If dental and vision insurance are not included in the health insurance premium they should be listed separately. All fringe benefits provided must be itemized. 7. Under the column entitled Basis for Cost Estimate , enter the formula for computing the cost for each fringe benefit. 8. Enter the total in the Total Cost column.			
TITLE OR POSITION	NAME OF INDIVIDUAL	SALARY PER MONTH	FT OR PT	% OF TIME ON GRANT	MONTHS TO BE EMPLOYED	TOTAL COST	
SUBTOTAL						\$	
FRINGE BENEFITS	BASIS FOR COST ESTIMATE						
F.I.C.A. & Medicare (.0765) PENSION/RETIREMENT LIFE INSURANCE MEDICAL INSURANCE UNEMPLOYMENT COMPENSATION WORKERS' COMPENSATION LIAB. OTHER (PLEASE IDENTIFY)							
SUBTOTAL						\$	
State/Federal Share	\$	TOTAL PERSONNEL COST				\$	
Local Match Share	\$						

PERSONNEL INFORMATION

Grant Project Staff Only

Staff Member	Brief List of Experience and Current Job Responsibilities
1. _____ (Name) _____ (Title)	
2. _____ (Name) _____ (Title)	
3. _____ (Name) _____ (Title)	
4. _____ (Name) _____ (Title)	
5. _____ (Name) _____ (Title)	
6. _____ (Name) _____ (Title)	

VOLUNTEER MATCH		PROJECT TITLE:		
		APPLICANT AGENCY:		
INSTRUCTIONS				
1. Indicate all volunteer hours to be included in the Total Project Cost for Local Match purposes . Volunteer hours may be calculated at the rate of \$9.50 per hour. 2. Under Type of Service to be Provided , break volunteer hours down by types of services to be provided by the volunteers. <i>Keep in mind that volunteer hours utilized for match are under the same requirements as paid staff utilized by the grant.</i> 3. Under Number of Volunteers , indicate the number of volunteers who will be providing each type of service indicated.		4. Under the column, Total Number of Hours , indicate the total number of hours to be contributed by volunteers on an annual basis for each type of service that will be used for Local Match purposes. 5. Under the column, \$9.50 per hour , no entry is necessary. 6. Under the Local Match column, enter the result of the following calculation: (Total Number of Hours) x (\$9.50 per hour). 7. Volunteer time may only be utilized toward the Local Match Share total.		
Type of Service Provided	Number of Volunteers	Total Number of Hours	X \$9.50 per hour	Local Match
			X \$9.50	
			X \$9.50	
			X \$9.50	
			X \$9.50	
			X \$9.50	
			X \$9.50	
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			X \$9.50	
			X \$9.50	
			X \$9.50	
			X \$9.50	
			X \$9.50	
			X \$9.50	
TOTAL VOLUNTEER HOURS		TOTAL LOCAL MATCH		\$

TRAVEL		PROJECT TITLE:	
		APPLICANT AGENCY:	
INSTRUCTIONS			
1. Itemize travel expenses by event. 2. Under the Item, list the type of travel (local, in-state, out-state), location and reason for travel. 3. Under the Basis for Cost Estimate, supply information regarding total distance to be traveled, the rate per mile, total days of travel, daily subsistence allowance, and number of people traveling. 4. Justify in the narrative (under Budget Justification) why the travel is necessary for project execution and who will be traveling. 5. In training projects, where travel and subsistence of trainees is included, list the item separately and show the number of trainees and the allowance per trainee.		6. Tuition and registration fees for eligible training <u>must be listed under the Supplies/Operations</u> category. 7. Enter the costs in the Total Cost column. 8. The amount of mileage allowance shall not exceed 34.5¢ per mile and shall not exceed actual transportation fare where public common-carrier transportation is used (exclusive of first class accommodations.) Travel must be by the most direct practical route. Actual transportation expenses and the amount of meal charges shall not exceed the actual costs and must be reasonable. Lodging expenses will be reasonable. Local rules and regulations will apply if they are more restrictive than those mentioned above. Travel expenses will not be reimbursed until the travel has occurred.	
ITEM	BASIS FOR COST ESTIMATE	TOTAL COST	
State/Federal Share	\$	TOTAL TRAVEL COST	\$
Local Match Share	\$		

EQUIPMENT		PROJECT TITLE:	
		APPLICANT AGENCY:	
INSTRUCTIONS			
1. Equipment is defined as tangible personal property having a useful life of more than one year. 2. Under the Item column, describe each type of equipment in terms of size, capability, etc.		3. Under the Basis for Cost Estimate , list the number of units of each type of equipment and provide a unit cost. 4. Under the Total Cost column, record the cost to be calculated as follows: (number of units) x (unit cost).	
ITEM	BASIS FOR COST ESTIMATE		TOTAL COST
State/Federal Share	\$	TOTAL EQUIPMENT COST	\$
Local Match Share	\$		

SUPPLIES/OPERATIONS	PROJECT TITLE:		
	APPLICANT AGENCY:		
INSTRUCTIONS			
1. Under the Item column, list by type of supply or operational expense (i.e., office supplies, training materials, telephone, postage, etc.). Be as specific as possible. 2. Under the Basis for Cost Estimate column, list the cost per unit and the number of units requested.		3. Under Total Cost column, record the cost to be calculated as follows: (number of units) x (unit cost). 4. Tuition and registration fees for eligible training must be listed on this page. These expenses will not be reimbursed until the training has occurred. 5. Please refer to the Certified Assurances pertaining to supplies and operating expenses for further information.	
ITEM	BASIS FOR COST ESTIMATE		TOTAL COST
State/Federal Share	\$	TOTAL SUPPLIES/ OPERATIONS COST	\$
Local Match Share	\$		

CONTRACTUAL		PROJECT TITLE:	
		APPLICANT AGENCY:	
INSTRUCTIONS			
1. Under the Nature of Service column, describe the types of consultant services or contracts desired. 2. Under the Basis for Cost Estimate , enter the total amount of time to be used and the rate of compensation per unit of time. <i>In the narrative under budget justification, include statements justifying the rate of compensation per unit of time and the necessity for including the costs in the project budget.</i>		3. In the Total Cost column, record the costs to be calculated as follows: (amount of time) x (rate of compensation). 4. A copy of any contractual agreement made as a result of an award through this grant program must be forwarded to the Department of Public Safety. Any service that does not have a contractual agreement cannot be listed on this page. 5. Any contractual agreement entered into as a result of an award of contract by DPS must be for a time period within the contract period designated by DPS.	
NATURE OF SERVICE	BASIS FOR COST ESTIMATE		TOTAL COST
State/Federal Share	\$	TOTAL CONTRACTUAL COST	\$
Local Match Share	\$		

STOP Violence Against Women Certified Assurances

Agency Name:

Project Title:

Contract No.:

In addition to the general terms contained in the Application Packet, the applicant is also conditioned upon and subject to compliance with the following assurances:

1. The applicant assures that it will comply, and all its subcontractors will comply, with the applicable provisions of Sections 2001 through 2006 of the Omnibus Crime Control and Safe Streets Act of 1968, as amended by Title IV, Section 40121 of the Violent Crime Control and Law Enforcement Act of 1994, Public Law 103-322; The Reauthorized Violence Against Women Act of 2000; the Missouri Department of Public Safety Financial and Administrative Guidelines for Contracts; the provisions of the current Office of Justice Programs Financial and Administrative Guide for Grants; and all other applicable federal laws, orders, circulars or regulations.
2. The applicant agrees to maintain the records necessary to evaluate the effectiveness of the project.
3. The applicant agrees to submit, within 15 days of the project period ending date, a performance report which will include a summary description of the project; the data collected on the performance indicators included in the program description/annual report forms included in the application packet; the results of the evaluation process; and a brief assessment of impact.
4. **Travel:** Expenditures for travel must be supported and documented by signed travel vouchers. Hotel or motel receipts must be on file. Maximum amounts cannot exceed the amounts approved in the budget for mileage, meals and other expenses. Reimbursement of travel expenses will not occur until after the travel has taken place.
5. **Equipment:** Expenditures for equipment must be in accordance with the approved budget. All items of equipment must be assigned an inventory number and be readily identifiable as being purchased with Missouri Department of Public Safety funds.
6. **Supplies and Operations:** Expenditures for supplies and operating expenses shall be in accordance with the approved budget and documentation in the form of paid bills and vouchers must support each expenditure. Care shall be given to assure that all items purchased directly relate to the specific project objectives for which the contract was approved. The titles of films, brochures, and other "miscellaneous items", not specifically outlined in the approved budget, must be submitted to the Missouri Department of Public Safety, Office of the Director, for approval **prior** to purchasing same. Reimbursement of conference registration fees will not be reimbursed until the conference has taken place.
7. **Personnel:** The applicant assures that time and attendance records shall support any personnel costs and that proper records shall be maintained to adequately substantiate time spent to carry out the specific objectives for which the contract was approved.

If less than 100% of an employee's salary is supported by the contract – either through federal funding or local match funding – that employee must keep a timesheet of all activities to document the percentage of time spent on the project. Only actual time spent on the project may be claimed. The timesheets must include the date, the beginning time, a brief description and the ending time for each task performed by the employee. If less than 100% of an employee's salary is supported by the contract – either through the federal funding or the local match funding – but the employee is spending 100% of her/his time on the project as supported by the employee's job description, this requirement may be waived at the discretion of the Department of Public Safety.
8. **Local Share:** The approved match must be expended within the time period (the contract period) for which federal funds are available for expenditure under the approved contract.

Records must be maintained to show the amount and timing of the match. These records are subject to audit in the same manner and to the same extent as books and records dealing with federal funds.

Failure to provide the approved match may result in your agency being required to refund the federal share to the Missouri Department of Public Safety.

9. **Interest:** The applicant assures that federal funds will not be used to pay interest or any other financial costs.

Contract Adjustments/Budget Revisions:

Formal Budget Revisions: Prior approval must be received from the Missouri Department of Public Safety, Office of the Director, for certain types of changes to the budget or project scope. These types of changes are listed below:

- a. The addition or deletion of a specific budget line item
- b. Monetary additions to the Personnel Budget Category
- c. A change in the approved budget categories in excess of 10 percent of the total award amount.
- d. A change in the scope of the project
- e. A change in or temporary absences of the project director or authorized official
- f. A change in the project site
- g. A change in the name of the agency

Prior approval must be received from the Missouri Department of Public Safety for any **programmatic** changes in the contract.

Timing of Formal Budget Revisions: If a budget or programmatic revision is required, the request for a change must be submitted at least **30** days prior to the proposed change taking effect and at least **60** days prior to the end of the contract. Budget revisions must be requested on the required form. Budget revisions will not be retroactive unless there are extenuating circumstances presented.

Informal Budget Revisions:

Prior approval does not need to be sought from the DPS when transferring less than 10% (cumulative during the contract period) of the total grant award from one budget category to another budget category or within a budget category (except for the Personnel Budget – Prior approval for any monetary additions to this category is necessary).

10. **Contractual Services:** The applicant assures that the following general requirements will be followed when subcontracting for work or services contained in this proposal:

- All consultant and contractual services shall be supported by written contracts stating the services to be performed, rate of compensation and length of time over which the services will be provided which shall not exceed the length of the grant period.
- A copy of all written contracts for contractual or consultant services must be forwarded to the Missouri Department of Public Safety, Office of the Director, upon their ratification.
- Payments must be supported by statements providing the services rendered and supporting the period covered.
- Any contract or agreement for services of \$3,000 or more which is not entered into as a result of competitive bidding procedures (or if only one bid is received) must receive prior approval from the Missouri Department of Public Safety, Office of the Director.
- Individual rates cannot exceed \$450.00 per day without prior approval from the Missouri Department of Public Safety and the U.S. Department of Justice.

11. **Procurement:** The applicant assures that all procurement transactions whether negotiated or competitively bid and without regard to dollar value shall be conducted in a manner so as to provide maximum open and free competition. In addition, the applicant assures that all procurement transactions will meet the minimum standards set forth in the ***Missouri Department of Public Safety Financial and Administrative Guide for Contracts***.

12. **Sole Source Procurement:** When only one bid is received or only one vendor is contacted, the purchase is deemed to be sole source procurement. Sole source procurement on purchases with an individual cost from \$3,000.00 to \$100,000 requires **prior** approval by the Department of Public Safety. In addition, sole source procurement for amounts in excess of \$100,000 requires **prior** U.S. Department of Justice approval.

13. The applicant shall fully coordinate all activities in the performance of the project with those of the Missouri Department of Public Safety, Office of the Director.
14. The applicant fully understands that the intent of the STOP Violence Against Women Grant Program is to address violent crimes committed against adult women, (especially the crimes of domestic violence, sexual assault and stalking), and will comply with this intent.
15. The applicant certifies that all expendable and non-expendable property purchased with funds awarded under this contract shall be used for STOP Violence Against Women Grant Program purposes only.
16. The applicant assures that federal block grant funds made available will not be used to supplant state and local funds, but will be used to increase the amount of funds that would, in the absence of federal funds, be made available for the activities of this project.
17. The applicant assures that fund accounting, auditing, monitoring, and such evaluation procedures as may be necessary to keep such records as the Missouri Department of Public Safety, Office of the Director, shall prescribe will be provided to assure fiscal control, proper management, and efficient disbursement of funds received under this contract.
18. **Audit:** The applicant agrees to provide an annual audit of their organization in accordance with the provisions of Office of Management and Budget Circulars applicable to their organization.
19. The applicant assures that it shall maintain such data and information and submit such reports, in such form, at such times, and containing such information as the Missouri Department of Public Safety, Office of the Director, may require.
20. The applicant assures that, if required to formulate an Equal Employment Opportunity Program (EEOP) in accordance with 28 CFR 42.301 et.seq., it will submit a certification to the Missouri Department of Public Safety that it has a current EEOP on file which meets the requirements therein.
21. The applicant assures that, in connection with the furnishing of services under this contract, it will comply and any subcontractors will comply with all applicable requirements and provisions of the Americans with Disabilities Act (ADA).
22. The applicant assures that it will comply, and all its subcontractors will comply, with the non-discrimination requirements of the Omnibus Crime Control and Safe Streets Act of 1968, as amended, 42 USC 3789 (d), or the Victims of Crime Act (as applicable); Title VI of the Civil Rights Act of 1964, as amended; Section 504 of the Rehabilitation Act of 1973, as amended; Subtitle A, Title II of the Americans with Disability Act (ADA) (1990); Title IX of the Education Amendments of 1972; the Age Discrimination Act of 1975; Department of Justice Non-Discrimination Regulations, 28 CFR Part 42, Subparts C, D, E, and G; and Department of Justice regulations on disability discrimination 28 CFR Part 35 and Part 39.
23. The applicant assures that in the event a federal or state court or federal or state administrative agency makes a finding of discrimination after a due process hearing on the grounds of race, color, religion, national origin or sex against a recipient of funds, the recipient will forward a copy of the finding to the Office of Civil Rights Compliance (OCRC) of the Office of Justice Programs, U.S. Department of Justice.
24. If the applicant is a law enforcement agency, the applicant assures that the agency is in compliance with sections 590.100 to 590.180, RSMo. Section 590.180, subsection 2 states that "any law enforcement agency which employs a peace officer who is not certified as required by sections 590.100 to 590.180 shall not be eligible to receive state or federal funds which would otherwise be paid to it for purposes of training and certifying peace officers or for other law enforcement, safety or criminal justice purposes."
25. The applicant assures that it will provide the eligible direct victim services, as may be required, set forth in Missouri's Constitutional Amendment for Victims' Rights and **Section 595.209, RSMo.** (These eligible direct victim services do not include general witness assistance.)
26. The Missouri Department of Public Safety, Office of the Director, reserves the right to terminate any contract entered into as a result of this application at its sole discretion and without penalty or recourse by giving written notice to the contractor of the effective date of termination. In the event of termination pursuant to this

paragraph, all documents, data, and reports prepared by the contractor under the contract shall, at the option of the Missouri Department of Public Safety, become property of the State of Missouri. The contractor shall be entitled to receive just and equitable compensation for that work completed prior to the effective date of termination.

27. It is understood and agreed upon that, in the event funds from state and/or federal sources are not appropriated and continued at an aggregate level sufficient to cover the contract costs, or in the event of a change in federal or state laws relevant to these costs, the obligations of each party hereunder shall thereupon be terminated immediately upon receipt of written notice.

28. An award of contract, entered into as a result of this application, shall not bind or purport to bind the Department of Public Safety for any contractual commitment in excess of the original contract period contained in such an award of contract. However, the Department of Public Safety shall have the right, at its sole discretion, to renew any such award of contract on a year-to-year basis. Should the Department of Public Safety exercise its right to renew the contract, the renewal shall be subject to the terms set forth by the Department of Public Safety in the documents developed for such renewal. Failure to comply with such terms set forth by the Department of Public Safety will result in the forfeiture of such a renewal option.

29. The applicant assures that, if this project is intended for a law enforcement agency, such agency must be in compliance with the provisions of Section 43.505, RSMo relating to uniform crime reporting. Section 43.505, subsection 3, states that "Every law enforcement agency in the state shall:

- a. Submit crime incident reports to the Department of Public Safety on forms or in the format prescribed by the department; and
- b. Submit any other crime incident information which may be required by the Department of Public Safety."

Section 43.505, subsection 4 states "Any law enforcement agency that violates this section may be ineligible to receive state or federal funds which would otherwise be paid to such agency for law enforcement, safety or criminal justice purposes."

30. The applicant assures that, if the project is intended for a law enforcement agency, such agency is in compliance with the provisions of Section 590.650, RSMo relating to racial profiling. Failure to comply with these statutory provisions may result in the withholding of funds to the noncompliance law enforcement agency.

Failure to comply with any of the foregoing certified assurances could result in funds being withheld until such time as the contractor takes appropriate action to rectify the incident(s) of non-compliance.

The applicant hereby certifies, by signature, acceptance of the terms and conditions specified or incorporated by reference herein, including those stated in the contract application.

Authorized Official

DATE

Project Director

DATE

AUDIT REQUIREMENTS

If you are awarded funds through the Missouri Department of Public Safety, you **ARE** required to submit a copy of your agency's audit for the period covered by this contract.

- ⇒ An audit is required for the agency fiscal year, when **State** financial assistance, (which consists of funds received directly from the State of Missouri, but does not include federal pass-through funds), of **\$100,000** or more is expended by the applicant agency.
- ⇒ An audit is required for the agency fiscal year, when **Federal** financial assistance, (which consists of funds received from the Federal Government or federal funds passed through state agencies), of **\$500,000** or more is expended by the applicant agency.
- ⇒ No audit of any type is required when **STATE** financial assistance of less than \$100,000 or **FEDERAL** financial assistance of less than \$500,000 is expended. However, the recipient must maintain detailed records on grant activity required for such grants.



This section must be completed **even if your agency is not required** to submit an audit to the Missouri Department of Public Safety.

1. Date of last audit: _____ 2. Date(s) covered by last audit: _____

3. Last audit performed by: _____

Phone number of auditor: _____

4. Date of next audit: _____ 5. Date(s) to be covered by next audit: _____

6. Next audit will be performed by: _____

Phone number of auditor: _____

7. Total amount of funds received from **ALL** entities **INCLUDING** the Department of Public Safety

Federal Amount: \$ _____ State Amount: \$ _____

NOTE: State Auditor of Missouri audits all state agencies, third class counties, and all judicial circuits. First, second, and fourth-class counties and other local political subdivisions and not-for-profit agencies must make arrangements with a private CPA firm to perform an audit.

Signed: _____
(Authorized Official)

Date: _____

Agency: _____

Phone: _____

REPORT OF EXPENDITURES AND CHECK PAYEE INFORMATION

The following information is necessary if your agency receives a contract from the Missouri Department of Public Safety

Name and address of the individual who will be responsible for completing the Monthly Report of Expenditures and Request for Reimbursement. *(The Monthly Report of Expenditures and Request for Reimbursement will be mailed to this individual each month.)*

NAME: _____

AGENCY: _____

ADDRESS: _____

(Include city, state, and zip)

TELEPHONE: _(_____)_____ FAX NUMBER: _____

E-MAIL ADDRESS: _____

Check Payee Information - List the name and address of the check payee. Do not include an individual's name, *only the name and address of the agency to which the check must be made payable.*

AGENCY: _____

ADDRESS: _____

(Include city, state, and zip)

Name and address of the individual to whom the check needs to be mailed. *(The check will be mailed directly to this individual each month.)*

NAME: _____

AGENCY: _____

ADDRESS: _____

(Include city, state, and zip)

TELEPHONE: _(_____)_____ FAX NUMBER: _____

E-MAIL ADDRESS: _____

OTHER FUNDING SOURCES

List the agency's other funding sources for **this project**. Include any other sources of federal, state, local, or private funding. *(Make copies of this form if necessary.)*

Source of Funding	Amount	Description of the Funding	Funding Period	Expenditures Covered by Funding
	\$			
	\$			
	\$			
	\$			
	\$			
	\$			

dps 1/24/01



U.S. DEPARTMENT OF JUSTICE
OFFICE OF JUSTICE PROGRAMS
OFFICE OF THE COMPTROLLER

**Certification Regarding
Debarment, Suspension, Ineligibility and Voluntary Exclusion
Lower Tier Covered Transactions
(Sub-Recipient)**

This certification is required by the regulations implementing Executive Order 12549, Debarment and Suspension, 28 CFR Part 67, Section 67.510, Participants' responsibilities. The regulations were published as Part VII of the May 26, 1988 *Federal Register* (pages 19160-19211).

(BEFORE COMPLETING CERTIFICATION, READ INSTRUCTIONS ON REVERSE)

- (1) The prospective lower tier participant certifies, by submission of this proposal, that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department of agency.
- (2) Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

Name and Title of Authorized Representative

Signature

Date

Name of Organization

Address of Organization

Instructions for Certification

1. By signing and submitting this proposal, the prospective lower tier participant is providing the certification set out below.
2. The certification in this clause is a material representation of fact upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective lower tier participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.
3. The prospective lower tier participant shall provide immediate written notice to the person to which this proposal is submitted if at any time the prospective lower tier participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
4. The terms "covered transaction," "debarred," "suspended," "ineligible," "lower tier covered transaction," "participant," "person," "primary covered transaction," "principal," "proposes," and "voluntarily excluded," as used in this clause, have the meanings set out in the Definitions and Coverage sections of rules implementing Executive Order 12549.
5. The prospective lower tier participant agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency with which this transaction originated.
6. The prospective lower tier participant further agrees by submitting this proposal that it will include the clause titled, "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion – Lower Tier Covered Transaction," without modification in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may check the Non-procurement List.
8. Nothing contained in the foregoing shall be construed to require establishment of a system of reports in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
9. Except for transactions authorized under paragraph 5 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

CERTIFICATION OF IRS 501(c)(3) STATUS
AGENCY NAME
PROJECT TITLE
CONTRACT NO.

This form is to be completed by nonprofit organizations only.

Nonprofit organizations are required to have IRS 501 (c)(3) status or evidence that application for 501 (c)(3) status has been made.

Signature hereto certifies that your agency currently has an IRS 501 (c)(3) status or has made application for IRS 501 (c)(3) status.

Authorized Official

Date

Project Director

Date

Financial and Administrative Guidelines

AWARD AND ACCEPTANCE OF CONTRACT

Award of Contract

After completion of the review process, contract applications designated for approval are formally awarded by the Missouri Department of Public Safety in the form of the **Award of Contract Document (APPENDIX A)**. This award identifies the Missouri Department of Public Safety (Administrative Agency), the Contractor, the Contract Period, amount of federal funds, and the Contract Number. As appropriate, Special Conditions are included which the Contractor must meet if the award is accepted. All correspondence concerning the award shall refer to the designated Contract Number shown on the **Award of Contract** document.

Acceptance of Award

The **Award of Contract** constitutes a contractual agreement between the Missouri Department of Public Safety and the Contractor for use of federal funds in the implementation of the project covered by the award as outlined in the Application for Contract and Narrative Work Program. This contractual agreement may be terminated without further cause if the Contractor fails to

affirm its acceptance of the award by signing and returning the **Award of Contract** to the Missouri Department of Public Safety **WITHIN 45 DAYS** from the date of award. No federal funds shall be disbursed to the Contractor until the Missouri Department of Public Safety has received the signed acceptance.

Cancellation Conditions

If a project is not operational within 60 DAYS of the contract starting date, the Contractor must report by letter to the Missouri Department of Public Safety the steps taken to initiate the project, the reasons for delay, and the expected starting date. If a project is not operational with 90 DAYS of the contract starting date, the Contractor must submit a second statement to the Missouri Department of Public Safety explaining the implementation delay. Upon receipt of the 90-day letter, the Missouri Department of Public Safety may decide to continue the contract or cancel the project.

PAYMENT AND REPORTING OF FUNDS

Report of Expenditures and Request for Reimbursement

Contractors will be required to verify, on a monthly basis, actual cash expenditures and request reimbursement for same. The *Monthly Report of Expenditures and Request for Reimbursement* (APPENDIX B) is mailed to the Contractor on a monthly basis with the due date being the tenth (10th) day of each month. The *Monthly Report of Expenditures and Request for Reimbursement* is used by Missouri Department of Public Safety to process checks sent out to the Contractor for reimbursement of expenditures.

Obligated Funds

Funds are considered obligated by a Contractor when a legal liability to pay determinable sums for services or goods is incurred that will require payment during the

same or future period. When a purchase order is issued, funds are considered obligated. All funds must be obligated by the contract period ending date. Any funds not properly obligated within the contract period will lapse and revert to the Missouri Department of Public Safety. Travel Expenses will only be allowed for events, training, and other activities held during the time period of the contract. Funds cannot be obligated for an activity that will take place outside of the contract period.

Expended Funds

Funds are considered to be expended when payment is made. Funds that have been properly obligated by the end of the contract period will have 90 days in which to be expended. Any funds not expended at the end of that 90-day period will lapse and revert to the Missouri Department of Public Safety.

REPORTING REQUIREMENTS FOR REVISIONS

Budget Revisions

Formal Budget Revisions: Prior approval must be received from the Missouri Department of Public Safety, Office of the Director, for certain types of changes to the budget or project scope. These types of changes are listed below:

- a. The addition or deletion of a specific budget line item
- b. Monetary additions to the Personnel Budget Category
- c. A change in the approved budget categories in excess of 10 percent of the total award amount. (This does not apply to the Personnel Budget Category)
- d. A change in the scope of the project
- e. A change in or temporary absences of the project director or authorized official
- f. A change in the project site
- g. A change in the name of the agency

Timing of Formal Budget Revisions: If a budget or programmatic revision is required, the request for a change must be submitted at least 30 days prior to the proposed change taking effect and at least 60 days prior to the end of the contract. Budget revisions must be requested on the required form. Budget revisions will not be retroactive unless there are extenuating circumstances presented.

Informal Budget Revisions:

Prior approval does not need to be sought from the DPS when transferring less than 10% (cumulative during the contract period) of the total grant award from one budget category to another budget category (except for the Personnel Budget – Prior approval for monetary additions to this category is necessary).

Program Revisions

Prior approval must be received from the Missouri Department of Public Safety for any **programmatic** changes in the contract.

Contractors must make a written request for approval from the Missouri Department of Public Safety for major program changes at least 30 days prior to the proposed change. These include changes such as:

- a. A change in project activities as set forth in the approved Narrative Work Program.
- b. A change in or the temporary absence of the project director and/or authorized official.
- c. A change in a project staff position.
- d. A change in project site.
- e. The addition of an item to the project budget.

PROCUREMENT POLICY

Allowability of Costs

The Missouri Department of Public Safety has included allowable and unallowable costs in the *Program Description*. The U.S. Department of Justice Financial Guide and *Office of Management and Budget (OMB) Circular A-87*, "Cost Principles for State and Local Governments" and *OMB Circular A-122*, "Cost Principles for Nonprofit Organizations" provide the principles utilized in the establishment of the allowable and unallowable costs. OMB Circulars are guides for all federal grants. For requirements specific to VOCA, please refer to the *Program Description* contained in the Application Packet.

Procurement of Costs

It should be determined that the item to be purchased is an approved budget item (approved by the Missouri Department of Public Safety and shown in the application), that any necessary prior approval has been obtained, that no other item owned by the Contractor is available for the purpose, and that sufficient funds are in the budget.

All Contractors must adhere to the procurement standards contained in the OMB Circulars applicable to their organization as listed below:

- 1) State and Local Governments – Common Rule – Uniform Administrative Requirements for Grants and Cooperative Agreements to State and Local Governments, 28 CFT Part 66.
- 2) Nonprofit Organizations – OMB Circular A-110, Uniform Administration Requirements and Agreements with Institutions of Higher Education, Hospitals, and other Nonprofit Organizations.

All contractors are encouraged to use their own procurement regulations provided that the procurement regulations conform to applicable federal law and the standards identified in the Procurement Standards Sections of the Grant Common Rule or OMB Circular A-110. At a minimum, the contractor must meet the following procurement standards:

- 1) All procurement transactions whether negotiated or competitively bid and without regard to dollar value shall be conducted in a manner so as to provide maximum open and free competition.
- 2) All quotations and the rationale behind the selection of a source of supply must be retained, attached to the purchase order copy, and placed in the accounting files.

- 3) Where only one bid or positive proposal is received, it is deemed to be sole source procurement. Sole source procurement on amounts from \$3000 to \$100,000 requires prior approval from the Missouri Department of Public Safety. Sole source procurement of items costing \$100,000 or more requires prior U.S. Department of Justice approval.
- 4) Items costing less than \$3,000 may be purchased with prudence on the open market.
- 5) All purchases estimated to cost between \$3000 but less than \$24, 999, must be competitively bid, but need not be solicited by mail or advertisement.
- 6) All purchases with an estimated expenditure of \$25,000 or over shall be advertised for bids in at least two daily newspapers of general circulation in such places as are most likely to reach prospective bidders at least five days before bids for such purchases are to be opened.

Contract Requirements

When a Contractor subcontracts for work or services, the following is required:

- 1) All consultant and contractual services shall be supported by written contracts stating the services to be performed, rate of compensation and length of time over which the services will be provided which shall not exceed the length of the contract period.
- 2) Compensation for individual consultant services is to be reasonable and consistent with that paid for similar services in the marketplace. Consultant rates cannot exceed \$450/day.
- 3) A copy of all written contracts for contractual or consultant services must be forwarded to the Missouri Department of Public Safety upon their ratification.
- 4) Payments must be supported by statements outlining the services rendered and supporting the period covered.
- 5) Any contract or agreement for service of \$3,000 or more which is not entered into as a result of competitive bidding procedures (or if only one bid is received) must receive prior approval from the Missouri Department of Public Safety.

PROPERTY

Definitions

The following definitions apply for the purpose of these policies and procedures:

- 1) Real Property means land, land improvements, and appurtenances thereto, excluding movable machinery and equipment.
- 2) Personal Property means property of any kind except real property. It may be tangible (having physical existence) or intangible (having no physical existence, such as patents, inventions, and copyrights).
- 3) Equipment is tangible, nonexpendable personal property having a useful life of more than one year and an acquisition cost of \$250 or more per unit.
- 4) Nonexpendable Personal Property means tangible personal property having a useful life of more than one year and an acquisition cost of \$250 or more per unit.

Title

Initially, title to property acquired in whole or in part with federal funds in accordance with an approved project

budget shall be vested in the Contractor, as long as said property is used for the purposes of the victim assistance project. When the property is no longer used for project purposes, the Contractor shall notify the Missouri Department of Public Safety for final disposition instructions.

Record Requirement

The Contractor will be required to maintain property management records. At a minimum, property management records maintained by the Contractor must meet the following requirements:

- 1) Records shall contain copies of the purchase order and invoice.
- 2) The records shall include an inventory control listing for nonexpendable property. The inventory control list must be reasonably current. The system may be manual or automated, centralized or decentralized. The record must contain:
 - a. Item description;
 - b. Source of property;

- c. Manufacturer's serial number and, if applicable, a control number'
 - d. Federally funded cost equity at time of acquisition;
 - e. Acquisition date and cost;
 - f. Location, use, and condition of property;
 - g. Ultimate disposition data including sale price or the method used to determine current fair market value.
- 3) A control system shall be in effect to ensure adequate safeguards to prevent loss, damage, or theft to the property. Any loss, damage, or theft of nonexpendable property shall be investigated, fully documented, and made part of the contract file.
 - 4) Adequate maintenance procedures shall be established to keep the property in good condition.

Inventory Record Retention

Records for nonexpendable property acquired with federal funds shall be retained for three years after final disposition of property.

Disposition of Personal Non-expendable Property

Contractors shall dispose of the personal non-expendable property when original or replacement equipment acquired under the award or subaward is no longer needed for the original project or program or for other activities currently or previously supported by a federal agency. Disposition of the equipment will be made as follows:

- 1) Items with a current per unit fair market value of less than \$5,000 may be retained, sold, or otherwise

disposed of with no further obligation to the Department of Public Safety.

- 2) Items with a current per unit fair market value in excess of \$5,000 may be retained or sold and the Department of Public Safety shall have a right to an amount calculated by multiplying the current market value or proceeds from the sale by the Department of Public Safety's share of the equipment. The seller is also eligible for sale costs.
- 3) In cases where a contractor fails to take appropriate disposition actions, the Department of Public Safety may direct the contractor to take other disposition actions.

Intangible Property

Copyrights – Where Department of Public Safety programs produce original books, manuals, films, or other copyrightable material, the Contractor may copyright such, but the administration reserves a royalty-free, nonexclusive and irrevocable license to reproduce, publish, translate, or otherwise use, and to authorize others to publish and use such materials.

Patents – If any discovery or invention arises or is developed in the course of or as a result of work performed in a Contractor's project, the contractor shall refer the discovery or invention to the U.S. Department of Justice which will determine whether or not patent protection will be sought, how any rights therein, including patent rights, will be disposed of and administered, and the necessity of other action required to protect the public interest in work supported with federal funds, all in accordance with the "Government Patent Policy" (President's Memorandum for Heads of Executive Departments and Agencies, February 18, 1983).

ACCOUNTING SYSTEM AND FINANCIAL RECORDS

Accounting Systems

All Contractors must establish and maintain accurate financial records and an adequate accounting system to account for funds awarded to them. These records shall include both federal funds and all matching funds. An acceptable and adequate accounting system is considered to:

- 1) Present and classify costs of the contract as required for budgetary and evaluation purposes;
- 2) Provide cost and property control to assure optimal use of federal funds;
- 3) Control funds and other resources to assure that the expenditure of funds and use of property are in compliance with any general or special conditions of the contract;
- 4) Meet the deadlines for submission of financial reporting information, as needed for control and evaluation of all contract costs.

Total Cost Budgeting and Accounting

Accounting for all contract funds shall be structured and executed on a "total program cost" basis. That is, total program costs, including federal funds and local matching funds, and any other sources included in the approved project budget, shall be the foundation for fiscal administration and accounting. Contract applications and financial reports require budget and cost estimates on the basis of total costs.

Contractor Responsibilities

All Contractors receiving federal funds through the Missouri Department of Public Safety are responsible for the management and fiscal control of all funds. Responsibilities include the accounting of receipts and expenditures, the maintaining of adequate financial records and the refunding of expenditures disallowed by audits.

The Contractor is responsible for all aspects of the contract including proper accounting and financial record keeping. These responsibilities include:

- 1) Reviewing Financial Operations;
- 2) Recording Financial Activities;
- 3) Budgeting and Budget Review;
- 4) Accounting for Non-State Contributions and Non-federal contributions;
- 5) Audit Requirements;
- 6) Reporting Irregularities.

Record Retention

Records of the Contractor, including books of original entry, source documents, supporting accounting transactions, the general ledger, subsidiary ledgers, personnel and payroll records, cancelled checks, and related documents and records are to be retained for a period of three years pursuant to the following:

- 1) The retention period starts from the date of submission of the final Report of Expenditures or from the submission of the audit for the contract period covered.
- 2) Personnel and payroll records shall include the time and attendance reports for all individuals reimbursed under a contract or subcontract, whether they are employed full-time or part-time.
- 3) Records must be retained beyond a three-year period if an audit is in progress and/or the findings of a completed audit have not been resolved. If an audit is completed and the findings are resolved prior to the three-year period, records will be retained until the end of the three-year period.
- 4) If state and local law requires a longer period of retention, access to the records will be allowed for purposes of audit.
- 5) The financial records must be kept in an orderly manner and be available for audit purposes to the Missouri Department of Public Safety.
- 6) Contractors are responsible for protecting their records against fire, theft, or other possible damages.

MONITORING

Monitoring Requirements

The Missouri Department of Public Safety, in accordance with State and Federal Guidelines, may monitor contracts awarded through this program. Monitoring will be conducted through on-site visits or through desk monitoring as deemed necessary by the program manager. Applicant agencies may be monitored annually.

In certain situations, a contract may be monitored – on-site or through desk monitoring – on a regular basis to assure compliance. These situations include, but are not limited to:

- A report to Department of Public Safety of the mishandling of grant funds;
- A report of the use of grant funds for ineligible activities;
- Discrepancies noted on the Monthly Report of expenditures and/or Detail Sheet;
- A change in the managing staff within a contracting agency;

Financial and/or programmatic issues of noncompliance found during a regularly scheduled monitoring visit or desk monitoring.

Monitoring Purpose

Monitoring of all programs funded through the Missouri Department of Public Safety is designed to provide assistance of the Contractor both from a technical and programmatic standpoint, as well as, to provide the Missouri Department of Public Safety with the necessary information to ensure the contractor's compliance with state and federal guidelines. This monitoring report will also be used as a tool for determining the progress of the project in achieving its outlined goals and objectives.

Monitoring Information Required

The following information and records will be required and reviewed at the time the monitoring report is conducted:

- 1) A brief summary of project activities to measure the performance of the project to date;
- 2) A list of project expenditures including both the local match and federal funds spent along with copies of invoices for equipment purchased receipts associated with meal expenses, travel/conference expenses and mileage logs;
- 3) Copies of bid records to verify compliance with local and/or state procurement policies;
- 4) An inventory listing including items with a unit cost of \$250 or more purchased under the contract;
- 5) Copies of time records for any personnel funded by the contract or used as local match under the contract (a suggested format is included as APPENDIX E);
- 6) A copy of any written operational procedures developed for the project; and
- 7) Other information pertinent to the federally funded project.

AUDIT REQUIREMENTS

Audit Responsibilities

All Contractors are required to comply with the audit requirements contained in OMB Circular A-128, "Audits of State and Local Government" or OMB Circular A-133, "Grants and Agreements with Institutions of Higher Education and Other Nonprofit Organizations". The required audits are to be on an organization wide basis as opposed to a grant-by-grant basis. All Contractors are further required to include in the audit report a schedule of federal assistance showing the total expenditures of each grant program. The schedule should include:

- 1) Name of federal agency;
- 2) Award amount;
- 3) Contract period;
- 4) Expenditure activity during the audit period.

State and Local Units of Government

If an organization expends \$500,000 or more in federal funds in a year, the organization must have an audit performed in accordance with OMB Circular A-133, as amended.

The required audits are to be on an organization-wide basis, independently performed, and must be in accordance with "Government Auditing Standards" covering financial audits.

Audits under OMB Circular A-133 shall be conducted with reasonable frequency, usually annually, but not less frequently than every two years.

Technical Assistance

The Office of Inspector General, Department of Justice, is available to provide technical assistance to contractors in implementing the audit requirements. The assistance is available for areas such as:

- 1) Review of the audit arrangements and/or negotiations;
- 2) Review of the audit program or guide to be used for the conduct of the audit.

GENERAL CONTRACT REQUIREMENTS

Unallowable Costs

The following is a list of costs generally unallowable for all projects funded through the Missouri Department of Public Safety:

1. Real Property Acquisition;
2. Honoraria;
3. Indirect costs of conferences, symposia, and workshops including entertainment, sports, visas, passport charges, tips, bar charges, beverages, personal telephone calls, or laundry charges;
4. Bonuses or commissions;
5. Lobbying;
6. Cost of fundraising;
7. Military type equipment;
8. Compensation of federal employees;
9. Travel of federal employees.
10. Indirect agency costs

Printing and Publicity

Contractors are encouraged to make the results and accomplishments of their activities available to the public through printed publication or media release.

All printed materials, however, must include an acknowledgement of the funding source similar to the following:

"This project was supported by funding made available through the STOP Violence Against Women Act administered by the U.S. Department of Justice and the Missouri Department of Public Safety, Office of the Director."

Termination of Contracts

In the event that the Missouri Department of Public Safety determines that a Contractor is operating in a manner inconsistent with the provisions of the application or is failing to comply with the applicable regulations, the

Missouri Department of Public Safety may permanently or temporarily terminate the contract. Should this occur, the Contractor has the right to an appeal hearing. In the event a contract is permanently terminated, the Department of Public Safety may take action as deemed appropriate to recover any portion of the contract funds remaining or an amount equal to the portion of the contract funds wrongfully used.

Criminal Penalties

Whoever embezzles, willfully misapplies, steals, or obtains by fraud any funds, assets, or property which are the subject of a grant or contract or other form of assistance, whether receive directly or indirectly from the

Missouri Department of Public Safety or the U.S. Department of Justice shall be fined not more than \$10,000 or imprisoned for not more than five years, or both. Whoever knowingly and willfully falsifies, conceals, or covers up by trick, scheme, or device, any material fact in any application for assistance shall be subject to prosecution under the provisions of Section 1001 of Title 18, United States Code. Any justice program or project underwritten, in whole or in part, by any grant or contract of other form of assistance, whether received directly or indirectly from the Missouri Department of Public Safety or U.S. Department of Justice shall be subject to the provisions of Section 371 of Title 18, United States Code.

Appendix

Change of Information Form

VOCA Contract No. _____ NCAP Contract No. _____ Title II Contract No. _____
STOP Contract No. _____ CLAP Contract No. _____ Title V Contract No. _____
SSVF Contract No. _____ MCLUP Contract No. _____ Challenge Contract No. _____
RSAT Contract No. _____ LLEBG Contract No. _____ JAIBG Contract No. _____
LGSD Contract No. _____

Please list any change of information from that included in your approved contract.

Agency Name: _____

Authorized Official: _____

Project Director: _____

Address: _____

Telephone Number: _____

E-Mail Address: _____

Other Changes: _____
(Please specify change. Include changes in personnel, board members, job descriptions, organizational charts, etc. Please attach copies.) _____

****PLEASE NOTE****

The Department of Public Safety must approve certain changes in the budget and requests for such changes must be submitted on a Request to Revise the Budget form, which is included in your application packet.

Agency Name: _____

Signature: _____ Date: _____
(Authorized Official)



Return to: Missouri Department of Public Safety, P.O. Box 749, Jefferson City, MO 65102-0749.



MISSOURI DEPARTMENT OF PUBLIC SAFETY
OFFICE OF THE DIRECTOR
REQUEST TO REVISE THE BUDGET

P.O. Box 749
Jefferson City, MO 65102
Telephone: 573-751-4905
FAX: 573-751-5399



Contractor Name

Project Title

Contract Number

COST CATEGORY	CURRENT BUDGET		REQUESTED REVISED BUDGET		NET CHANGE (+ OR -)
PERSONNEL <i>(Plus Fringes and Overtime)</i>					
VOLUNTEER TIME					
TRAVEL					
EQUIPMENT					
SUPPLIES/OPERATIONS					
CONTRACTUAL					
RENOVATION/CONSTRUCTION					
TOTAL PROJECT COSTS		100%		100%	\$0.00
TOTAL FEDERAL/STATE SHARE		%		%	\$0.00
TOTAL LOCAL MATCH SHARE		%		%	\$0.00

NARRATIVE JUSTIFICATION – Briefly explain the requested change. Explain why a reduction in some categories will not be detrimental to the project and an increase in others will further the objectives of the project. **Attach copies of each changed budget detail sheet.**

PREPARED BY

Signature

Date

Telephone Number:

E-Mail Address:

Fax Number:

APPROVED BY

Authorized Official Signature

Date

INSTRUCTIONS FOR REQUEST TO REVISE THE BUDGET

Contractors must make a written request for approval from the Missouri Department of Public Safety for program changes at least 30 days prior to the change and at least 60 days prior to the end of the contract period. Please see the appropriate grant program financial and administrative guidelines for contracts for further information regarding changes that require prior approval from the Department of Public Safety or contact your respective program specialist or representative.

Enter the **Contract Name** as it appears on the current Award of Contract document.

Enter the **Project Title** as it appears on the current Award of Contract document.

Enter the **Contract Number** as it appears on the current Award of Contract document.

Under the **Current Budget** column, include the current budget as approved by the Department of Public Safety. This budget will either be outlined on the Application for Funding form or on a Contract Adjustment Notice previously authorized by the Department of Public Safety.

Under the **Requested Revised Budget** column, include the new budget for which approval is being sought. Keep in mind that expenditures up to the date of the requested change in the budget must be included in this revised budget section. Make sure that the totals reflect the appropriate local match share if required.

*Under the **Net Change (+ OR -)** column, enter the difference between the current budget and the requested revised budget. For example, if the current personnel budget is \$20,000 and the requested revised budget is \$25,000, enter +\$5,000 in the Net Change column.

Attach new budget pages for any budget category for which a revision is requested. The new budget page must include expenditures up to the date of the requested change in the budget along with the requested revisions.

In the Narrative Justification section, provide a brief explanation regarding the requested change. Include the rationale for making this request. Be sure to explain why a reduction in some categories will not be detrimental to the project and an increase in others will further the objectives of the project. Be as specific as possible.

Obtain proper signatures and include the telephone number, e-mail address, and fax number for the person preparing this request.

Please contact your respective program specialist or representative if you have any questions regarding this budget revision process.

dps 9/9/02

DPS GRANTS ADMINISTRATION
PAY PERIOD AND ATTENDANCE REPORT
(Please complete both sides of activity report and attach to this form)

NAME OF SUBGRANTEE _____ CONTRACT # _____

NAME OF EMPLOYEE _____ MONTH/YEAR _____

TITLE & NATURE OF WORK
 PERFORMED _____

Please fill in the starting date and ending date of the pay period by month and day (example 12/25) in the appropriate box.
 TIME SHEET DATES MUST CORRESPOND DIRECTLY WITH THE AGENCY'S INTERNAL PAY PERIOD.

	Start Date																End Date
Day of Month																	
Total Hours Worked																	
Total Hours Worked on Project																	

Day of Month																	
Total Hours Worked																	
Total Hours Worked on Project																	

Total Hours Worked on Project	Divided By	Total Hours Worked This Month	Equals =	Percent of Time on Project	TIMES X	Total Salary/ Benefits for Pay Period(s)	Equals =	Amount Charged to Grant

I CERTIFY THAT THE ABOVE IS A TRUE AND CORRECT STATEMENT.

 Employee

 Date

 Supervisor

 Date

DEFINITIONS FOR SERVICES PROVIDED

Crisis Counseling refers to in-person or telephone crisis intervention, emotional support and guidance and counseling provided by advocates, counselors, mental health professionals or peers. Such counseling may occur at the scene of the crime, immediately after a crime, or be provided on an ongoing basis.

Follow-up refers to in-person contacts, telephone contacts, and written communications with victims to offer emotional support, provide empathetic listening, check on a victim's progress, etc.

Therapy/Professional Counseling refers to intensive professional psychological/psychiatric treatment for individuals, couples, and family members related to counseling to provide emotional support in crisis arising from the occurrence of crime. This includes the evaluation of mental health needs, as well as the actual delivery of psychotherapy.

Group Treatment refers to the coordination and provision of supportive group activities and includes self-help, peer, social support, etc.

Shelter/Safe House refers to providing short-term and long-term housing and related support services to victims and families following victimization. *(This does not include referral for such housing.)*

Information and Referral (in-person) refers to in-person contacts with victims during which time services and available support are identified.

Criminal Justice Support/Advocacy refers to support, assistance and advocacy provided to victims at any stage of the criminal justice process, including post-sentencing services and support.

Emergency Financial Assistance refers to cash outlays for transportation, food, clothing, emergency housing, etc.

Emergency Legal Advocacy refers to filing temporary restraining orders and other protective orders, but **does not** include criminal prosecution or the employment of attorneys for non-emergency purposes, such as custody disputes, civil suits, etc.

Assistance in Filing Compensation Claims includes making victims aware of the availability of crime victim compensation, assisting the victim in completing the required forms, gathering the needed documentation, etc. It may also include follow-up contact with the victim compensation agency on behalf of the victim.

Personal Advocacy refers to assisting victims in securing rights, remedies, and services from other agencies; locating emergency financial assistance, intervening with employers, creditors, and others on behalf of the victim; assisting in filing for losses covered by public and private insurance programs including workman's compensation, unemployment benefits, welfare, etc; accompanying the victim to the hospital; etc.

Telephone Contact refers to telephone contacts with victims during which time services and available support are identified. This does not include calls during which counseling is the primary function of the telephone call, nor does it include crisis hotline calls.

Crisis Hotline Calls refers to the number of crisis hotline calls logged.

Other refers to other allowable grant services and activities

If funding through this grant program supports less than 100% of an employee's salary, that employee must keep a time sheet of all activities to document the percentage of time spent on the project. Only actual time spent on the project may be claimed. Use the front side of this form to document hours spent on allowable activities and services. Use the backside of this form to document hours spent on unallowable services and activities. Allowable services and activities included under the "Other" column heading must be described on a separate sheet of paper. Please round partial hours (up or down), and report time in increments of whole hours. *Note: See back of Pay Period and Attendance Report for definitions of services.

PLEASE DO NOT FORGET TO COMPLETE TOTALS FOR EACH DAY. THE "TOTAL HOURS WORKED ON PROJECT" SHOULD BE TRANSFERRED TO THE "TOTAL HOURS WORKED ON PROJECT" ROW FOR EACH DATE ON THE PAY PERIOD AND ATTENDANCE REPORT.

[illegible]

For unallowable activities and services, provide a description of the activity/service performed and the time (hours) spent on that activity. Please round partial hours (up or down), and report time in increments of whole hours. THE "TOTAL UNALLOWABLE HOURS WORKED ON



STOP Annual Report Form Court Services

Contractor: _____
Contact Person: _____
Address: _____

E-mail Address: _____
Telephone Number: _____
Fax Number: _____
Contract Number: _____

Reporting Period: January 1– December 31 **Report Due Date:** January 15

A. Indicate the number of victims served by your STOP funded project during this project period. *Each victim should be counted only once, i.e., a victim of a series of spouse abuse assaults should be counted more than once only as a result of separate and unrelated crimes.*

_____ Adults Molested as Children	_____ Stalking
_____ Domestic Violence	_____ Assault
_____ Women _____ Children	
_____ Adult Sexual Assault	_____ Other (specify) _____
_____ Elder Abuse	
_____ Total number served by this STOP project.	

B. Indicate the number of victims served in the following categories.

_____ Child (must be in conjunction with services provided to the mother of the child)
_____ Elderly _____ Disabled/Handicapped _____ Native Americans _____ Minorities

C. Indicate the number of victims who received the following services through this STOP funded project. *Please see the instructions for definitions of each service.*

_____ Crisis Counseling (In Person)	_____ Follow-up	_____ Information/Referral (In Person)
_____ Criminal Justice Support/Advocacy	_____ Emergency Legal Advocacy (Orders of Protection)	_____ Telephone Contact Information/Referral
_____ Assistance Filing Compensation Claims	_____ Personal Advocacy	
_____ Translation Services	_____ Other (specify) _____	

For the following sections, please provide as much information as possible. Attach additional sheets if necessary.

D. Complete the following information as it relates to any special training received by staff or volunteers through this STOP project.

Staff Member <i>(who attended the training)</i>	Title of Training Session or Conference	Date(s) of the Training	Duration <i>(hours, days, etc.)</i>	Location of Training

E. Complete the following information as it relates to any special training or public awareness presentations provided by your agency through this STOP project.

Presenter(s)	Topic(s)	Date(s) of the Training	Duration <i>(hours, days, etc.)</i>	Audience <i>(types of professionals in attendance)</i>	Number in Attendance

- F. Describe efforts to promote coordinated efforts within the community to aid crime victims and address crimes targeting women. Include information regarding the meetings of formal task force units, committees, etc. Include any needs assessments, program evaluations, training efforts, new protocol, policies, procedures, etc.**
- G. Describe any notable activities conducted to improve the delivery of victim services. These activities need to be related specifically to the STOP funded project and/or coordination of the STOP project.**
- H. Describe any notable activities aimed at educating the community regarding crimes committed against women, public awareness, and/or prevention.**

I. Include and/or attach anecdotal information and individual case histories illustrating how STOP funds have been used to assist crime victims.

J. Identify any emerging issues or notable trends impacting crimes against women in your area.

Project Director Date

Authorized Official Date



STOP Annual Report Form Sexual Assault Nurse Examiner Programs

Contractor: _____
Contact Person: _____
Address: _____

E-mail Address: _____
Telephone Number: _____
Fax Number: _____
Contract Number: _____

Reporting Period: January 1– December 31 **Report Due Date:** January 15

- A. Indicate the staff and volunteer positions funded by this STOP project.** (Include the person's name, title and full-time equivalent, i.e., 1 is a full time employee, .25 is a ¼ time employee, .50 is a half time employee, etc.)

Name	Title	Full-time Equivalent

- B. Indicate the number of active nurse examiners involved in this STOP funded project.**

_____ Active Nurse Examiners

- C. Indicate the number of nurse examiners recruited and trained through this STOP funded project.**

_____ Nurse Examiners Recruited

_____ Nurse Examiners Trained

- D. Indicate the number of adult sexual assault crimes reported to law enforcement in your agency's service area.**

_____ Adult Sexual Assault Crimes

- E. Indicate the average time between the arrival of the crime victim at the hospital or clinic and the arrival time of the nurse examiner and/or victim advocate. Include other information that may clarify the time reported.**

_____ Hours on Average

Additional Information:

F. Indicate the number of adult sexual assault crime victims treated through the SANE program.

_____ Total Number Served _____ Referrals from Law Enforcement

G. Indicate how many of the crime victims served filed a police report.

_____ Filed a Report at Time of Treatment _____ Did Not File a Report

_____ File a Report at a Later Time _____ Unknown

H. Indicate the time elapsed between the assault on the victim and her arrival at the hospital.

_____ Less than 24 hours _____ 24 – 48 hours _____ 48 – 72 hours _____ Over 72 hours

I. Indicate the efficacy rate in rape collection kits as evidenced by feedback from the crime lab and prosecutor.

_____ %

J. Indicate the number of cases successfully prosecuted as a result of the SANE program.

_____ Total Cases Successfully Prosecuted

For the following sections, please provide as much information as possible. Attach additional sheets if necessary.

K. Complete the following information as it relates to any special training received by staff or volunteers through this STOP project.

Staff Member <i>(who attended the training)</i>	Title of Training Session or Conference	Date(s) of the Training	Duration <i>(hours, days, etc.)</i>	Location of Training

- L. Complete the following information as it relates to any special training or public awareness presentations provided by your agency through this STOP project.

Presenter(s)	Topic(s)	Date(s) of the Training	Duration (hours, days, etc.)	Audience (types of professionals in attendance)	Number in Attendance

- M. Describe efforts to promote coordinated efforts within the community to aid crime victims and address crimes targeting women. Include information regarding the meetings of formal task force units, committees, etc. Include any needs assessments, program evaluations, training efforts, new protocol, policies, procedures, etc.

- N. Describe any notable activities conducted to improve the delivery of victim services. These activities need to be related specifically to the STOP funded project and/or coordination of the STOP project.

O. Describe any notable activities aimed at educating the community regarding crimes committed against women, public awareness, and/or prevention.

P. Include and/or attach anecdotal information and individual case histories illustrating how STOP funds have been used to assist crime victims.

Q. Identify any emerging issues or notable trends impacting crimes against women in your area.

Project Director Date

Authorized Official Date

Please Note: This Annual Performance Report must be received by January 15th during the year immediately following the end of the contract period for the referenced contract. Failure to submit this Annual Performance Report by January 15th could result in the termination of any current funding awarded to this contractor.



**STOP Annual Report Form
Special Investigators and Prosecutors**

Contractor: _____
Contact Person: _____
Address: _____

E-mail Address: _____
Telephone Number: _____
Fax Number: _____
Contract Number: _____

Reporting Period: January 1– December 31

Report Due Date: January 15

A. Indicate the number of special investigators and/or special prosecutors funded by this STOP project. (Use the full-time equivalent, i.e., 1 for a full time employee, .25 for a ¼ time employee or .5 for a ½ time employee, etc.)

_____ **Special Investigators**

_____ **Special Prosecutors**

B. Indicate the number of the following types of cases (*violence against women only*) **reported to Law Enforcement.**

_____ Adults Molested as Children

_____ Stalking

_____ Domestic Violence

_____ Assault

_____ Adult Sexual Assault

_____ Other (specify) _____

_____ Elder Abuse

C. Indicate the number of the following types of cases (*violence against women only*) **investigated by Law Enforcement.**

_____ Adults Molested as Children

_____ Stalking

_____ Domestic Violence

_____ Assault

_____ Adult Sexual Assault

_____ Other (specify) _____

_____ Elder Abuse

D. Indicate the number of the following types of cases (*violence against women only*) **reviewed by the Prosecutor.**

_____ Adults Molested as Children

_____ Stalking

_____ Domestic Violence

_____ Assault

_____ Adult Sexual Assault

_____ Other (specify) _____

_____ Elder Abuse

E. Indicate the number of the following types of cases (*violence against women only*) **charged by the Prosecutor.**

_____ Adults Molested as Children

_____ Stalking

_____ Domestic Violence

_____ Assault

_____ Adult Sexual Assault

_____ Other (specify) _____

_____ Elder Abuse

F. Indicate the number of convictions for each of the following types of cases (*violence against women only*).

_____ Adults Molested as Children	_____ Stalking
_____ Domestic Violence	_____ Assault
_____ Adult Sexual Assault	_____ Other (specify) _____
_____ Elder Abuse	

G. Indicate the number of dismissals for each of the following types of cases (*violence against women only*).

_____ Adults Molested as Children	_____ Stalking	_____ Elder Abuse
_____ Domestic Violence	_____ Assault	
_____ Adult Sexual Assault	_____ Other (specify) _____	

H. Indicate the number of cases currently pending for the following types of crimes (*violence against women only*).

_____ Adults Molested as Children	_____ Stalking
_____ Domestic Violence	_____ Assault
_____ Adult Sexual Assault	_____ Other (specify) _____
_____ Elder Abuse	

I. Indicate the number of repeat offenders (*violence against women only*) **charged for each of the following.**

_____ Adults Molested as Children	_____ Stalking
_____ Domestic Violence	_____ Assault
_____ Adult Sexual Assault	_____ Other (specify) _____
_____ Elder Abuse	

For the following sections, please provide as much information as possible. Attach additional sheets if necessary.

J. Complete the following information as it relates to any special training received by staff or volunteers through this STOP project.

Staff Member <i>(who attended the training)</i>	Title of Training Session or Conference	Date(s) of the Training	Duration <i>(hours, days, etc.)</i>	Location of Training

K. Complete the following information as it relates to any special training or public awareness presentations provided by your agency through this STOP project.

Presenter(s)	Topic(s)	Date(s) of the Training	Duration <i>(hours, days, etc.)</i>	Audience <i>(types of professional in attendance)</i>	Number in Attendance

- L. Describe efforts to promote coordinated efforts within the community to aid crime victims and address crimes targeting women. Include information regarding the meetings of formal task force units, committees, etc. Include any needs assessments, program evaluations, training efforts, new protocol, policies, procedures, etc.**
- M. Describe any notable activities conducted to improve the delivery of victim services. These activities need to be related specifically to the STOP funded project and/or coordination of the STOP project.**
- N. Describe any notable activities aimed at educating the community regarding crimes committed against women, public awareness, and/or prevention.**

O. Include and/or attach anecdotal information and individual case histories illustrating how STOP funds have been used to assist crime victims.

P. Identify any emerging issues or notable trends impacting crimes against women in your area.

Project Director Date

Authorized Official Date

Please Note: This Annual Performance Report must be received by January 15th during the year immediately following the end of the contract period for the referenced contract. Failure to submit this Annual Performance Report by January 15th could result in the termination of any current funding awarded to this contractor.



**STOP Annual Report Form
Training/Technical Assistance**

Contractor: _____
Contact Person: _____
Address: _____

E-mail Address: _____
Telephone Number: _____
Fax Number: _____
Contract Number: _____

Reporting Period: *January 1 – December 31* **Report Due Date:** *January 15*

A. Provide the following information as it relates to any special training received by staff or volunteers through this STOP project.

Staff Member <i>(who attended the training)</i>	Title of Training Session or Conference	Date(s) of the Training	Duration <i>(hours, days, etc.)</i>	Location of Training

- B. Provide the following information as it relates to any special training or public awareness presentations provided by your agency through this STOP project.**

Presenter(s)	Topic(s)	Date(s) of the Training	Duration (hours, days, etc.)	Audience (types of professionals in attendance)	Number in Attendance

- C. Were pre-tests and post-tests utilized to evaluate the effectiveness of the training?** ____ Yes ____ No

If yes, provide the average, overall, scores on each of these tests.

_____ **Average Score on Pre-tests**

_____ **Average Score on Post-tests**

If no, give detailed information regarding how the effectiveness of the training was evaluated by those attending the training.

- D. Were the instructors evaluated individually?** _____ Yes _____ No

If yes, please provide the overall ratings of each instructor utilized to provide training.

- E. Provide the following information as it relates to any technical assistance provided to an individual or agency through this STOP funded project.

Technical Adviser(s)	Topic(s)	Date(s) Assistance Provided	Duration (hours, days, etc.)	Recipient of Assistance (Include Agency Name & Contact Person)

- F. Describe any notable activities conducted to improve the delivery of victim services. These activities need to be related specifically to the STOP funded project and/or coordination of the STOP project.

- G. Describe any notable activities aimed at educating the community regarding crimes committed against women, public awareness, and/or prevention, other than the specific training sessions previously addressed in this report.
- H. Include and/or attach anecdotal information and individual case histories illustrating how STOP funds have been used to assist crime victims.
- I. Identify any emerging issues or notable trends impacting crimes against women in your area.

Project Director Date

Authorized Official Date

Please Note: This Annual Performance Report must be received by January 15th during the year immediately following the end of the contract period for the referenced contract. Failure to submit this Annual Performance Report by January 15th could result in the termination of any current funding awarded to this contractor.



STOP Annual Report Form Victim Services

Contractor: _____
Contact Person: _____
Address: _____

E-mail Address: _____
Telephone Number: _____
Fax Number: _____
Contract Number: _____

Reporting Period: January 1– December 31 **Report Due Date:** January 15

A. Indicate the number of victims served by your STOP funded project during this project period. *Each victim should be counted only once, i.e., a victim of a series of spouse abuse assaults should be counted more than once only as a result of separate and unrelated crimes.*

_____ Adults Molested as Children	_____ Stalking
_____ Domestic Violence _____ Women _____ Children	_____ Assault
_____ Adult Sexual Assault	_____ Other (specify) _____
_____ Elder Abuse	
_____ Total number served by this STOP project. <i>(Do not include total number of hotline calls.)</i>	
_____ Total number of hotline calls logged by the STOP project. <i>(Please see instructions for definition of STOP project.)</i>	

B. Indicate the number of victims served in the following categories.

_____ Child (must be in conjunction with services provided to the mother of the child)
_____ Elderly _____ Disabled/Handicapped _____ Native Americans _____ Minorities

C. Indicate the number of victims who received the following services through this STOP funded project. *Please see the instructions for definitions of each service.*

_____ Crisis Counseling <i>(In Person)</i>	_____ Follow-up	_____ Therapy/Prof. Counseling
_____ Group Treatment/Support	_____ Shelter/Safe House	_____ Information/Referral <i>(In Person)</i>
_____ Criminal Justice Support/Advocacy	_____ Emergency Financial Assistance	_____ Emergency Legal Advocacy <i>(Orders of Protection)</i>
_____ Assistance Filing Compensation Claims	_____ Personal Advocacy	_____ Telephone Contact Information/Referral
_____ Crisis Hotline Calls	_____ Other (specify) _____	

For the following sections, please provide as much information as possible. Attach additional sheets if necessary.

D. Complete the following information as it relates to any special training received by staff or volunteers through this STOP project.

Staff Member <i>(who attended the training)</i>	Title of Training Session or Conference	Date(s) of the Training	Duration <i>(hours, days, etc.)</i>	Location of Training

E. Complete the following information as it relates to any special training or public awareness presentations provided by your agency through this STOP project.

Presenter(s)	Topic(s)	Date(s) of the Training	Duration <i>(hours, days, etc.)</i>	Audience <i>(types of professional in attendance)</i>	Number in Attendance

- F. Describe efforts to promote coordinated efforts within the community to aid crime victims and address crimes targeting women. Include information regarding the meetings of formal task force units, committees, etc. Include any needs assessments, program evaluations, training efforts, new protocol, policies, procedures, etc.**
- G. Describe any notable activities conducted to improve the delivery of victim services. These activities need to be related specifically to the STOP funded project and/or coordination of the STOP project.**
- H. Describe any notable activities aimed at educating the community regarding crimes committed against women, public awareness, and/or prevention.**

I. Include and/or attach anecdotal information and individual case histories illustrating how STOP funds have been used to assist crime victims.

J. Identify any emerging issues or notable trends impacting crimes against women in your area.

Project Director Date

Authorized Official Date

DPS STOP GRANT ANNUAL PERFORMANCE REPORT INSTRUCTIONS

Instructions—Each agency receiving STOP funds is required to submit a STOP Annual Performance Report on the uses and affects these grant funds have had on addressing crimes committed against women. This report must be submitted by January 15th, to the Missouri Department of Public Safety, P.O. Box 749, Jefferson City, MO 65102.

A **STOP project** refers to activities and services **supported by STOP funds plus the required match**. Except where indicated otherwise, the information in the STOP Annual Performance Report **must be based solely on STOP projects**, not the entire agency nor on non-STOP supported activities and services.

A. Provide the number of victims served by the STOP funded project during the reporting period. Indicate the number of victims served by type of victimization. If a victim was the subject of more than one type of crime (separate incidents), identify under each category of victimization.

NOTE: The data in this section is based upon the number of victims served by STOP projects during the reporting period. In this section, each victim should be counted only once, e.g., a victim of a series of spouse abuse assaults, for example, should be counted once. A person may be counted more than once only as a result of entirely separate and unrelated crimes.

B. Provide the number of victims served by the categories identified. If a victim falls under more than one category, identify under each applicable category, i.e., an elderly victim who is also a minority would be counted once under the "elderly" and once under the "minority" categories, etc.

C. Provide the number of victims receiving each type of service. Please be sure to only count services **provided by your agency** through the **STOP funded project**.

Crisis Counseling refers to in-person crisis intervention, emotional support and guidance and counseling provided by advocates, counselors, mental health professionals or peers. Such counseling may occur at the scene of the crime, immediately after a crime, or be provided on an ongoing basis.

Follow-up refers to in-person contacts, telephone contacts, and written communications with victims to offer emotional support, provide empathetic listening, check on a victim's progress, etc.

Therapy/Professional Counseling refers to intensive professional psychological/psychiatric treatment for individuals, couples, and family members related to counseling to provide emotional support in crises arising from the occurrence of crime. This includes the evaluation of mental health needs, as well as the actual delivery of psychotherapy.

Group Treatment refers to the coordination and provision of supportive group activities and includes self-help, peer, social support, etc.

Shelter/Safe House refers to providing short-term and long-term housing and related support services to victims and families following victimization. *(This does not include referral for such housing.)*

Information and Referral (in-person) refers to in-person contacts with victims during which time services and available support are identified.

Criminal Justice Support/Advocacy refers to support, assistance and advocacy provided to victims at any stage of the criminal justice process, to include post-sentencing services and support.

Emergency Financial Assistance refers to cash outlays for transportation, food, clothing, emergency housing, etc.

Emergency Legal Advocacy refers to filing temporary restraining orders and other protective orders, but **does not** include criminal prosecution or the employment of attorneys for non-emergency purposes, such as custody disputes, civil suits, etc.

Assistance in Filing Compensation Claims includes making victims aware of the availability of crime victim compensation, assisting the victim in completing the required forms, gathering the needed documentation, etc. It may also include follow-up contact with the victim compensation agency on behalf of the victim.

Personal Advocacy refers to assisting victims in securing rights, remedies, and services from other agencies; locating emergency financial assistance, intervening with employers, creditors, and others on behalf of the victim; assisting in filing for losses covered by public and private insurance programs including workman's compensation, unemployment benefits, welfare, etc; accompanying the victim to the hospital; etc.

Telephone Contact refers to telephone contacts with victims during which time services and available support are identified. This does not include calls during which counseling is the primary function of the telephone call, nor does it include crisis hotline calls.

Crisis Hotline Calls refers to the number of crisis hotline calls logged. Only include hotline calls if STOP funding is utilized to fund your hotline program.

Other refers to other STOP allowable services and activities not listed.

D. through J. - Please answer all questions noted in these sections. The Department of Public Safety will use this information to report to the legislature and/or Congress to justify the need for ongoing support.

Please Note: This Annual Performance Report must be received by January 15th during the year immediately following the end of the contract period for the referenced contract. Failure to submit this Annual Performance Report by January 15th could result in the termination of any current funding awarded to this contractor.

STOP Grant Federal Annual Performance Report –

Required Federal Annual Performance Reports must be printed separately from this application packet as they are in a different format. These reports can be found on our website under STOP Grant – Required Reports.